Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this ar amended filing

#### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Herbert First name  L. Middle name  Schimkus Last name and Suffix (Sr., Jr., II, III)		Patricia First name  A. Middle name  Schimkus  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6585		xxx-xx-4916

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Debtor 1 Herbert L. Schimkus Debtor 2 Patricia A. Schimkus

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		4049 Headsail Dr	
		New Port Richey, FL 34652  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Pasco	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Herbert L. Schimkus Debtor 2 Patricia A. Schimkus					Case number (if known)			
		,						
Par 7.	Tell the Court About				each, see Notice Required by	11 U.S.C. § 342(b) for Individuals Filing for Ba	ınkruptcy	
	Bankruptcy Code you are choosing to file under				age 1 and check the appropriat		.,,	
		Chap	ter 7					
		☐ Chap						
		☐ Chap						
		☐ Chap	ter 13					
8.	How you will pay the fee	abo ord a p	out how your der. If your pre-printed	ou may pay. Typica attorney is submit address.	ally, if you are paying the fee yo ting your payment on your beh	k with the clerk's office in your local court for rourself, you may pay with cash, cashier's checalf, your attorney may pay with a credit card of	k, or money r check with	
		☐ Ind	eed to pay e Filing Fe	<b>y the fee in instal</b> ee in Installments (	<b>Iments.</b> If you choose this option Official Form 103A).	on, sign and attach the Application for Individu	als to Pay	
		but apı	t is not req plies to yo	uired to, waive you ur family size and	ur fee, and may do so only if yo you are unable to pay the fee i	n only if you are filing for Chapter 7. By law, a our income is less than 150% of the official pown in installments). If you choose this option, you recial Form 103B) and file it with your petition.	erty line that	
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
	lact o youro.	<b>ப</b> 163.	District		When	Case number		
			District		When	0		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to I	ine 12.				
		☐ Yes.	Has yo	our landlord obtain	ed an eviction judgment agains	et you?		
				No. Go to line 12				
				Yes. Fill out <i>Initia</i> this bankruptcy p		Judgment Against You (Form 101A) and file it	as part of	

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	otor 1 Herbert L. Schimku otor 2 Patricia A. Schimku			Case number (if known)				
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	tor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Yes. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	tte & ZIP Code				
	it to this petition.		Check the appropriate be	ox to describe your business:				
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))				
			☐ Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))				
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))				
			☐ None of the above	e				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure						
	For a definition of small	■ No.	I am not filing under Cha	pter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	· Have Any	Hazardous Property or Ar	ny Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?					
	public health or safety? Or do you own any property that needs		If immediate attention is					
	immediate attention?		needed, why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?					
	- ,			Number, Street, City, State & Zip Code				

	С	ase	e 8:19-bk-00786-RCT Doc 1 Filed	01	./30	0/19 Page 5 of 67			
	tor 1 Herbert L. Schimku tor 2 Patricia A. Schimku					Case number (if known)			
art	5: Explain Your Efforts t	o Re	ceive a Briefing About Credit Counseling						
		Abo	out Debtor 1:		Abo	out Debtor 2 (Spouse Only in a Joint Case):			
15.	Tell the court whether you have received a briefing about credit counseling.	You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.		You ■	I must check one:  I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.			
re cr	The law requires that you receive a briefing about credit counseling before you file for bankruptcy.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.			Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.			
	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.			I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.			
	file.  If you file anyway, the court can dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.			Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.			
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver			I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.			
			of the requirement.  To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied			
			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you		filed If the rectifile cop	with your reasons for not receiving a briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.			
						developed, if any. If you do not do so, your case may be dismissed.			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.						
			I am not required to receive a briefing about credit counseling because of:			I am not required to receive a briefing about credit counseling because of:			
			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			
			Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.			□ Disability.     My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.			
			Active duty. I am currently on active military duty in a			Active duty. I am currently on active military duty in a military			

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb Deb	tor 1 Herbert L. Schimku tor 2 Patricia A. Schimku				Case nu	umber (if known)			
Part	6: Answer These Quest	ons for R	enorting Purnoses						
	What kind of debts do	16a.		mer debts? Cons	umer dehts are	e defined in 11 U.S.C. & 101(8) as "incurred by an			
	you have?	rou.	16a. <b>Are your debts primarily consumer debts?</b> <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.	☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	nat are not consum	ner debts or bus	siness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			property is excluded and administrative expenses itors?			
	administrative expenses are paid that funds will		□No						
	be available for distribution to unsecured creditors?		■ Yes						
18.	How many Creditors do you estimate that you owe?	<b>1</b> -49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000			
		□ 50-99		☐ 5001-10,000		☐ 50,001-100,000			
		☐ 100-1 ☐ 200-9		□ 10,001-25,00	00	☐ More than100,000			
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000	□ \$10,000,001	- \$50 million	☐ \$1,000,000,001 - \$10 billion			
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 □ \$100,000,00		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	\$10,000,001		\$1,000,000,001 - \$10 billion			
		_	001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		<b>—</b> \$500,	001 - \$1 million	Δ ψ100,000,00	Ψοσο πιιιιοπ	Note than \$60 billion			
Part	7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
						gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.			
			rney represents me and I did not pa tt, I have obtained and read the noti			is not an attorney to help me fill out this o).			
		I request	relief in accordance with the chapte	er of title 11, Unite	d States Code,	, specified in this petition.			
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.							
		/s/ Herb	ert L. Schimkus		/s/ Patricia A				
			L. Schimkus e of Debtor 1		Patricia A. So Signature of D				
		Executed	January 30, 2019 MM / DD / YYYY		Executed on	January 30, 2019 MM / DD / YYYY			

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Debtor 1 Herbert L. Schimk Debtor 2 Patricia A. Schimk	<del></del>	Case	Case number (if known)					
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite for which the person is eligible. I also certify the	ed States Code, and have e nat I have delivered to the d	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)					
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, schedules filed with the petition is incorrect.	certify that I have no know	ledge after an inquiry that the information in the					
	/s/ Sandra H. Day	January 30, 2019						
	Signature of Attorney for Debtor		MM / DD / YYYY					
	Sandra H. Day Printed name							
	The Day Law Office							
	PO Box 5535 Spring Hill, FL 34611-5535							
	Number, Street, City, State & ZIP Code							
	Contact phone 352-684-6545	Email address	daylawofficebk@tampabay.rr.com					
	189499 FL							
	Bar number & State							

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Fill	in this inform	ation to identify your ca	ase:			
Deb	otor 1	Herbert L. Schimkus	Middle Name	Last Name		
Deb	otor 2	Patricia A. Schimkus	S			
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Cas	se number					
	nown)				☐ Ch	eck if this is an
					am	nended filing
Эf	ficial For	m 106Sum				
Su	mmary of	Your Assets a	nd Liabilities ar	d Certain Statistical Information		12/15
nfo oui	rmation. Fill o r original form	ut all of your schedules	first; then complete th	are filing together, both are equally responsible information on this form. If you are filing amen the box at the top of this page.		
						r assets ue of what you own
1.	Schedule A/ 1a. Copy line	<b>B: Property</b> (Official Fore 55, Total real estate, fro	m 106A/B) m Schedule A/B		\$_	251,600.00
	1b. Copy line	62, Total personal prope	erty, from Schedule A/B		\$_	113,314.25
	1c. Copy line	63, Total of all property	on Schedule A/B		\$_	364,914.25
Par	t 2: Summa	rize Your Liabilities				
						ur liabilities ount you owe
2.		Creditors Who Have Clai total you listed in Columi		(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$_	448,922.00
3.		F: Creditors Who Have Unter total claims from Part 1		l Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$_	1.00
	3b. Copy the	total claims from Part 2	(nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$_	107,021.00
				Your total liabilities	\$	555,944.00
Par	t 3: Summa	rize Your Income and E	Expenses			
			•			
4.		Your Income (Official Forrombined monthly income		I	\$_	6,341.00
5.		Your Expenses (Official Fonthly expenses from line			\$_	6,211.20
Par	t 4: Answer	These Questions for A	dministrative and Stati	stical Records		
6.	•	g for bankruptcy under have nothing to report o	•	heck this box and submit this form to the court with y	our other	schedules.
7.	■ Yes What kind o	f debt do you have?				
				debts are those "incurred by an individual primarily fo g for statistical purposes. 28 U.S.C. § 159.	r a perso	nal, family, or

Official Form 106Sum Sun

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 2	Patricia A. Schimkus	Case number (if known)		
8. <b>Fro</b>	om the Statement of Your Current Monthly Income: Cop	ov your total current monthly income from Official	l Form	

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,939.21

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Herbert L. Schimkus

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	7,307.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	7,308.00

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		Case	3.19-DK-0078	19-00	The Doc't Filed 01/30/19	9 Page	10 01 07		
Fill	in this informa	tion to identify	your case and th	is filin	g:				
Deb	otor 1	Herbert L. S		Name	Last Name				
	otor 2 ouse, if filing)	Patricia A. S	chimkus	Name	Last Name				
Uni	ted States Bank	ruptcy Court fo	r the: MIDDLE DI	ISTRIC	T OF FLORIDA				
Cas	se number							_	Check if this is an amended filing
_	ficial Forr	_	_						
	chedule			an acco	only once. If an asset fits in more than o	an catogory lie	t the accet in		12/15
1. D		ve any legal or e			Estate You Own or Have an Interest In lence, building, land, or similar property?				
1.1				Wha	t is the property? Check all that apply				
	4049 Headsail Dr Street address, if available, or other description		scription	Duplex or multi-unit building the amou			deduct secured claims or exemptions. Put ount of any secured claims on Schedule D: ors Who Have Claims Secured by Property.		
	New Port Ric	chey FL State	34652-0000 ZIP Code	□ ■	Manufactured or mobile home Land Investment property	Current va entire prop \$25			rent value of the ion you own? \$251,600.00
		☐ Time		Timeshare Other has an interest in the property? Check one		Describe the nature of your ownership inter (such as fee simple, tenancy by the entiretic			
				Wild		Fee Simp	•		
	Pasco				20010. 2 0)				
	County				Debtor 1 and Debtor 2 only		if this is com	munit	y property
					At least one of the debtors and another r information you wish to add about this it erty identification number:	(	tructions)		
					e obtained through Realtor.com				

Official Form 106A/B Schedule A/B: Property page 1

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Debte Debte		erbert L. Schimkus atricia A. Schimkus			Case	number (if known)		
1.2	If you own or have more than one, list here:  1738 Colleen Street  Street address, if available, or other description				What is the property? Check all that apply  Single-family home  Do not deduct secured claims or exe			
					Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
	Sarasota	. FL	34231-0000	•	Land	Current value of the entire property?	Current value of the portion you own?	
	City	State	ZIP Code		Investment property	Unknown	Unknown	
					Timeshare Other	Describe the nature of y	our ownership interest ancy by the entireties, or	
				_	has an interest in the property? Check one	a life estate), if known.	andy by the entireties, or	
	Sarasota					Fee Simple		
-	County			- 📙	Debtor 2 only			
	County			_	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Check if this is com	munity property	
					r information you wish to add about this iter erty identification number:	(,		
					se was listed for sale and didn't sell. listed for 6 months	It was listed for \$266,	000.00 and it	
some	one else d		ehicle, also rep	ort it on S	ny vehicles, whether they are registers Schedule G: Executory Contracts and Uni Prcycles		Phicles you own that	
3.1	Make:	Chevrolet	V	Vho has a	n interest in the property? Check one	Do not deduct secured cluthe amount of any secure		
	Model:	Colorado		Debtor	1 only	Creditors Who Have Clair		
	Year:	2011 ate mileage:	80,000 L	☐ Debtor:	·	Current value of the entire property?	Current value of the portion you own?	
	Other info				1 and Debtor 2 only one of the debtors and another	entire property:	portion you own:	
	NADA A	Average Trade Valu	ue _	_		¢40.705.00	040.705.00	
					if this is community property ructions)	\$10,725.00	\$10,725.00	
3.2	Make: Model:	Chevrolet Trax		Vho has a	n interest in the property? Check one	Do not deduct secured cl the amount of any secure Creditors Who Have Clai.	d claims on Schedule D:	
	Year:	2016		Debtor:	•			
	Approxim	ate mileage:	15,500	Debtor	1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
	Other info		1	At least	one of the debtors and another			
	NADA A	Average Trade Valı			if this is community property ructions)	\$12,950.00	\$12,950.00	

Official Form 106A/B Schedule A/B: Property page 2

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	lerbert L. Schimkus Patricia A. Schimkus	Ca	se number (if known)	
		and other recreational vehicles, other vehicles, and watercraft, fishing vessels, snowmobiles, motorcycle a		
		,		
□ No				
Yes				
4.1 Make:	Boston	Who has an interest in the property? Check one		claims or exemptions. Put ured claims on Schedule D:
Model:	Whaler	Debtor 1 only	Creditors Who Have C	laims Secured by Property.
Year:	1981	Debtor 2 only	Current value of the	Current value of the
		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	formation: // 25 HP Evinrude Outboard ler	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$2,650.00	\$2,650.00
Part 3: Descri	ibe Your Personal and Household	te that number here		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ Yes. De	Couch, 2 loves entertainment chairs, server/ Range/Stove, linens, sm kitc chairs, BBQ gi vacuum cleane	seats, chair, 3 end tables, coffee table, 3 lamps, center, 4 bookcases, desk, carpet/rug, kitchen tabuffet, curio cabinet, 2 Refrigerators, Freezer, dishwasher, Microwave, dishes, pots, pans, utenhen appliances, Washer, Dryer, patio table/8 parill, 2 beds, dresser, 2 chest of drawers, sewing ner, power washer, carpet cleaner, misc hand tool generator, 2 grinders/sanders, chain saw/tablesa wacker, blower	nsils, atio nachine, s, misc	\$3,000.00
	Televisions and radios; audio, vincluding cell phones, cameras	rideo, stereo, and digital equipment; computers, printer , media players, games	s, scanners; music collec	ctions; electronic devices
— 163. De		aptop, 2 mobile phones,		\$285.00
	s of value Antiques and figurines; painting other collections, memorabilia,	s, prints, or other artwork; books, pictures, or other art	objects; stamp, coin, or l	
■ res. De		/ memorabilia, antique sewing machine		\$150.00
Examples:	for sports and hobbies Sports, photographic, exercise, musical instruments	and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and	kayaks; carpentry tools;

Yes. Describe.....
Official Form 106A/B

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	Herbert L. Schimkus Patricia A. Schimkus		Case number (if known)	
	misc hobby eq	uipment		\$100.00
10. <b>Firearms</b> <i>Example</i>				
■ No □ Yes. □	escribe			
	s: Everyday clothes, furs, leather	coats, designer wear, shoes, accessories		
□ No ■ Yes. □	escribe			
	his and hers pe	ersonal clothing		\$100.00
□ No	s: Everyday jewelry, costume jew	elry, engagement rings, wedding rings, heirlo	oom jewelry, watches, gems, gol	d, silver
	2 wedding ban	ds, 3 rings, misc costume jewelry		\$300.00
□ No	a animals s: Dogs, cats, birds, horses escribe			
	4 dogs, 1 cat, t	urtles-priceless		\$0.00
□ No	r personal and household item ive specific information	s you did not already list, including any he	ealth aids you did not list	
	2 bicycles			\$100.00
for Par		es from Part 3, including any entries for p	ages you have attached	\$4,035.00
		interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		, in your home, in a safe deposit box, and on	hand when you file your petition	
			Cash	\$55.00
_	s: Checking, savings, or other fin	ancial accounts; certificates of deposit; share e accounts with the same institution, list each		uses, and other similar
□ No ■ Yes		Institution name:		
Official Form	106A/B	Schedule A/B: Property		page 4

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Debtor 1 Debtor 2	Herbert L. Schimkus Patricia A. Schimkus		Case number (if known)	
	17.1.	Checking	Chase Bank # 0399 Head of household account	\$700.00
	17.2.	Checking	Chase Bank # 1116 Social Security deposited	\$60.00
	17.3.	savings	Chase Bank # 3933	\$100.00
	17.4.	Savings	Achieva Credit Union # 8718-S1	\$1.00
<i>Exam</i> ■ No	,		okerage firms, money market accounts	
19. <b>Non-</b> p	oublicly traded stock and venture		orated and unincorporated businesses, including an interest in an LLC, pa	ırtnership, and
	. Give specific information Nar	about them me of entity:	 % of ownership:	
Nego Non-i ■ No	ntiable instruments include progotiable instruments are . Give specific information	personal checks, cas those you cannot tra	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	ement or pension accoun	ts	403(b), thrift savings accounts, or other pension or profit-sharing plans	
	. List each account separat	ely. of account:	Institution name:	
	IRA		Merrill Edge #4553	\$13,628.30
	401K		AT&T Retirement Savings Plan #	\$54,433.81
			Management Cash Balance Program of the AT&T PBP	\$13,976.14
Your <i>Exam</i>		s you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or others	
■ No □ Yes			Institution name or individual:	
_	ities (A contract for a perio	dic payment of mon	ey to you, either for life or for a number of years)	
■ No □ Yes	lssuer nam	e and description.		
26 U.S	sts in an education IRA, in 5.C. §§ 530(b)(1), 529A(b),		ualified ABLE program, or under a qualified state tuition program.	
■ No □ Yes	Institution r	name and descriptio	n. Separately file the records of any interests.11 U.S.C. § 521(c):	

Official Form 106A/B Schedule A/B: Property

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	ebtor 1 ebtor 2	Herbert L. Schimkus Patricia A. Schimkus	Case number (if known)	
25.	Trusts, ■ No	equitable or future interests in property (other than anything	g listed in line 1), and rights or powers exercis	able for your benefit
		Give specific information about them		
26.	Examp	s, copyrights, trademarks, trade secrets, and other intellectualles: Internet domain names, websites, proceeds from royalties and		
	■ No □ Yes.	Give specific information about them		
27.		es, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative association	holdings, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		unds owed to you		·
	■ No □ Yes.	Give specific information about them, including whether you alrea	ady filed the returns and the tax years	
29.	Examp	support  oles: Past due or lump sum alimony, spousal support, child suppo  Give specific information	rt, maintenance, divorce settlement, property sett	lement
30.		amounts someone owes you  bles: Unpaid wages, disability insurance payments, disability bene- benefits; unpaid loans you made to someone else	efits, sick pay, vacation pay, workers' compensati	on, Social Security
	_	Give specific information		
31.	_Examp	ts in insurance policies bles: Health, disability, or life insurance; health savings account (F	HSA); credit, homeowner's, or renter's insurance	
	■ No □ Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
32.	If you a someo	erest in property that is due you from someone who has die are the beneficiary of a living trust, expect proceeds from a life inside has died.  Give specific information		property because
33.	Claims	against third parties, whether or not you have filed a lawsuit bles: Accidents, employment disputes, insurance claims, or rights		
		Describe each claim		
34.	■ No	contingent and unliquidated claims of every nature, including Describe each claim	g counterclaims of the debtor and rights to set	off claims
35		ancial assets you did not already list		
	■ No	Give specific information		

Official Form 106A/B Schedule A/B: Property page 6

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Debto Debto			Case number (if known)	
	Add the dollar value of all of your entries from Part 4, includir for Part 4. Write that number here		,	\$82,954.25
Part 5	: Describe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
37. <b>Do</b>	you own or have any legal or equitable interest in any business-relat	ted property?		
	No. Go to Part 6.			
П	/es. Go to line 38.			
Part 6	: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Intere	st In.	
46. <b>D</b> o	o you own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	o you have other property of any kind you did not already list	1?		
	Examples: Season tickets, country club membership			
	***			
	Yes. Give specific information			
54. <i>I</i>	Add the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part 8	: List the Totals of Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate, line 2			\$251,600.00
56. <b>F</b>	Part 2: Total vehicles, line 5	\$26,325.00		
57. <b>F</b>	Part 3: Total personal and household items, line 15	\$4,035.00		
58. <b>F</b>	Part 4: Total financial assets, line 36	\$82,954.25		
59. <b>F</b>	Part 5: Total business-related property, line 45	\$0.00		
60. <b>F</b>	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>F</b>	Part 7: Total other property not listed, line 54	+\$0.00		
62. 1	Total personal property. Add lines 56 through 61	\$113,314.25	Copy personal property total	\$113,314.25
63. 1	Total of all property on Schedule A/B. Add line 55 + line 62			\$364,914.25

Official Form 106A/B Schedule A/B: Property page 7

Fill in this infor	mation to identify your	case:		
Debtor 1	Herbert L. Schimk	US Middle Name	Last Name	
Debtor 2	Patricia A. Schimk	cus		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number (if known)				☐ Check if this is a
				amended filing

#### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and I Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B		ck only one box for each exemption.	
4049 Headsail Dr New Port Rick 34652 Pasco County value obtained through Realtor. Line from <i>Schedule A/B</i> : 1.1	_	\$251,600.00	■	\$48,479.00 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(1); Fla. Stat. Ann. §§ 222.01 & 222.02
2011 Chevrolet Colorado 80,00 NADA Average Trade Value Line from <i>Schedule A/B</i> : 3.1	O miles —	\$10,725.00		\$2,000.00  100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(1)
Couch, 2 loveseats, chair, 3 end coffee table, 3 lamps, entertains center, 4 bookcases, desk, carp kitchen table/4 chairs, server/ bicurio cabinet, 2 Refrigerators, F Range/Stove, dishwasher, Microdishes, pots, pans, ut Line from Schedule A/B: 6.1	nent — et/rug, uffet, reezer,	\$3,000.00		\$2,000.00  100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, §4(2)
Checking: Chase Bank # 0399 Head of household account Line from <i>Schedule A/B</i> : 17.1	_	\$700.00		\$700.00  100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.11(2)(b)

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Patricia A. Schimkus Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Checking: Chase Bank # 1116 Fla. Stat. Ann. § 222.201; 11 \$60.00 \$60.00 Social Security deposited U.S.C. § 522(d)(10)(A) Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit savings: Chase Bank # 3933 Fla. Stat. Ann. § 222.11(2)(b) \$100.00 \$100.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit IRA: Merrill Edge #4553 Fla. Stat. Ann. § 222.21(2) \$14,573.19 \$13,628.30 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401K: AT&T Retirement Savings Plan # Fla. Stat. Ann. § 222.21(2) \$54,433.81 \$54,433.81 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit Management Cash Balance Program of Fla. Stat. Ann. § 222.21(2) \$13,976.14 \$13,976.14 the AT&T PBP Line from Schedule A/B: 21.3 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Herbert L. Schimkus

Debtor 1

Fill in this informa	ntion to identify you	ır casa:				
Debtor 1	Herbert L. Schim	IKUS Middle Name	Last Name			
Debtor 2	Patricia A. Schim					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the	MIDDLE DISTRICT OF F	LORIDA			
Case number					□ Chack	if this is an
(ii kilowii)					. –	led filing
Official Form	10CD					
Official Form		\\// a		al lass Durana and		
Schedule L	D: Creditors	Who Have Clair	ns Secure	a by Propert	<u>y                                    </u>	12/15
		If two married people are filing out, number the entries, and att				
1. Do any creditors ha	ave claims secured by	y your property?				
☐ No. Check to	his box and submit t	his form to the court with your	other schedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill in a	Ill of the information	below.				
Part 1: List All	Secured Claims					
	aims. If a creditor has i	more than one secured claim, list	the creditor separately	Column A	Column B	Column C
for each claim. If mor	e than one creditor has	s a particular claim, list the other c cal order according to the creditor	reditors in Part 2. As	Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Achieva CU		Describe the property that se	cures the claim:	\$12,319.00	\$12,950.00	\$0.00
Creditor's Name		2016 Chevrolet Trax 15, NADA Average Trade Va				
Attn: Bankru	iptcy					
Po Box 150	-	As of the date you file, the cla apply.	im is: Check all that			
Dunedin, FL		Contingent				
Number, Street, C	ity, State & Zip Code	Unliquidated				
Who owes the debt	t? Check one.	☐ Disputed  Nature of lien. Check all that a	apply.			
Debtor 1 only		☐ An agreement you made (su		cured		
Debtor 2 only		car loan)				
■ Debtor 1 and Debt	tor 2 only	Statutory lien (such as tax lie	en, mechanic's lien)			
At least one of the		☐ Judgment lien from a lawsui				
☐ Check if this clair community debt		Other (including a right to of	fset) Auto Loan			
	Opened					
	06/18 Last		at number 1200			
Date debt was incur	red Active 12/18	Last 4 digits of accoun	it number 1200			
2.2 Mr. Cooper		Describe the property that se	cures the claim:	\$205,441.00	Unknown	Unknown
Creditor's Name		1738 Colleen Street Sara				
		34231 Sarasota County				
		house was listed for sale sell. It was listed for \$26				
Attn: Bankru	intcv	it was listed for 6 months	3			
	ss Waters Blvd	As of the date you file, the cla apply.	nim is: Check all that			
Coppell, TX		Contingent				
Number, Street, C	ity, State & Zip Code	Unliquidated				
Who owes the debt	t? Check one.	☐ Disputed  Nature of lien. Check all that a	apply.			
Debtor 1 only	-	☐ An agreement you made (su		cured		
Debtor 2 only		car loan)				
Debtor 1 and Debt	<u>=</u>	Statutory lien (such as tax lie	,			
At least one of the	debtors and another	☐ Judgment lien from a lawsui	t			

Official Form 106D

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Debtor 1 Herbert L. Schimkus		С	ase number (if known)		
First Name Middle N	ame Last Name				
Debtor 2 Patricia A. Schimkus		<u></u>			
First Name Middle N	ame Last Name				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Mortgage			
Opened 09/06 Last Active 11/18	Last 4 digits of account num	hber 6393			
2.3 Pnc Mortgage	Describe the property that secures	the claim:	\$24,024.00	Unknown	Unknown
Creditor's Name	1738 Colleen Street Sarasota	a, FL			
Attn: Bankruptcy	34231 Sarasota County house was listed for sale and sell. It was listed for \$266,00 it was listed for 6 months As of the date you file, the claim is	0.00 and			
3232 Newmark Drive	apply.	CHECK All that			
Miamisburg, OH 45342	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
_	☐ An agreement you made (such as		d		
☐ Debtor 1 only ☐ Debtor 2 only	car loan)	mortgage or sect	urea		
	☐ Statutory lien (such as tax lien, me	ochanic's lion)			
Debtor 1 and Debtor 2 only	· · · · · · · · · · · · · · · · · · ·	scriatile 3 ilett)			
☐ At least one of the debtors and another☐ Check if this claim relates to a	Judgment lien from a lawsuit	Second Mor	taaae		
community debt	Other (including a right to offset)	Second Moi	igage		
Opened 09/06 Last  Date debt was incurred Active 01/19	Last 4 digits of account num	nber <u>8488</u>			
2.4 Suntrust Bk Tampa Bay	Describe the property that secures	the claim:	\$4,017.00	\$10,725.00	\$0.00
Creditor's Name	2011 Chevrolet Colorado 80,	000 miles			
Attn: Bankruptcy Mail Code VA-RVW-6290	NADA Average Trade Value				
PO Box 85092	As of the date you file, the claim is	Check all that			
Richmond, VA 23286	apply.  Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
11a.1.25., 3.135., 3.13, 3.14.3 a 2.p 3345	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as	mortgage or seco	ured		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Auto Loan			
Opened 11/13 Last Active					
Date debt was incurred 12/14/18	Last 4 digits of account num	1ber 7538			
	_				
2.5 Wells Fargo Home Mortgage	Describe the property that secures	the claim:	\$203,121.00	\$251,600.00	\$0.00
	Posonine the property that secures	viaiiii.	, · <b>-</b> · · · · ·	+== .,000.00	Ψ0.00

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הפטוטו	1 Herbert L.			Case number (if known)	
Debtor	First Name  2 Patricia A.	Middle Na	ame Last Name		
Deptoi	First Name	Middle Na	ame Last Name		
Cr	editor's Name		4049 Headsail Dr New Port Riche	ey, FL	
			34652 Pasco County	om.	
	ttn: Bankrupto	У	value obtained through Realtor.co  As of the date you file, the claim is: Check		
	o Box 10335 es Moines, IA	50306	apply.		
_			Contingent		
NU	ımber, Street, City, S	tate & Zip Code	☐ Unliquidated ☐ Disputed		
Who ov	ves the debt? C	heck one.	Nature of lien. Check all that apply.		
☐ Debt	or 1 only		☐ An agreement you made (such as mortg	rtgage or secured	
	or 2 only		car loan)	3.3	
■ Debt	or 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechani	nic's lien)	
_	ast one of the deb		☐ Judgment lien from a lawsuit		
	ck if this claim re nmunity debt	lates to a	Other (including a right to offset)	ortgage	
		0 1			
		Opened 07/16 Last			
Date de	bt was incurred	Active 01/19	Last 4 digits of account number	7493	
			· -		
Add th	ne dollar value of	your entries in C	olumn A on this page. Write that number h	here: \$448,922.00	
	is the last page of that number here		the dollar value totals from all pages.	\$448,922.00	
Wille	_	<b>.</b>			
Part 2:	List Others t	o Be Notified fo	r a Debt That You Already Listed		
trying to	collect from your collect from you	u for a debt you o	we to someone else, list the creditor in Par you listed in Part 1, list the additional cred	ebt that you already listed in Part 1. For example, if a collection agency is Part 1, and then list the collection agency here. Similarly, if you have more reditors here. If you do not have additional persons to be notified for any	
П					
	lame, Number, St Achieva CU	reet, City, State & 2	Zip Code	On which line in Part 1 did you enter the creditor? 2.1	
-	0125 Ulmerto				
	argo, FL 346	n Rd		Last 4 digits of account number	
				Last 4 digits of account number	
□ .				Last 4 digits of account number	
_ \	lame. Number. St	19	žip Code		
N	Лr. Cooper		Zip Code	Last 4 digits of account number  On which line in Part 1 did you enter the creditor?	
N 3	Mr. Cooper 350 Highland	reet, City, State & 2	Zip Code		
N 3	Лr. Cooper	reet, City, State & 2	Zip Code	On which line in Part 1 did you enter the creditor? 2.2	
N 3	Mr. Cooper 350 Highland	reet, City, State & 2	Zip Code	On which line in Part 1 did you enter the creditor? 2.2	
I 3	Mr. Cooper 350 Highland Houston, TX 7	reet, City, State & 2		On which line in Part 1 did you enter the creditor? 2.2	
N	Mr. Cooper 850 Highland Houston, TX 7 Jame, Number, St Pnc Mortgage	reet, City, State & 2		On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3	
M 3 H	Mr. Cooper 850 Highland Houston, TX 7 Lame, Number, St Pnc Mortgage Po Box 8703	reet, City, State & 2 7067 reet, City, State & 2		On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number	
M 3 H	Mr. Cooper 850 Highland Houston, TX 7 Jame, Number, St Pnc Mortgage	reet, City, State & 2 7067 reet, City, State & 2		On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3	
N   F   F   C	Mr. Cooper 850 Highland Houston, TX 7 Hame, Number, St Pnc Mortgage Po Box 8703 Dayton, OH 45	reet, City, State & 2 7067 reet, City, State & 2	Zip Code	On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number	
N   F   F   C   C   C   C   C   C   C   C	Mr. Cooper 850 Highland Houston, TX 7 Hame, Number, St Pnc Mortgage Po Box 8703 Dayton, OH 45	reet, City, State & 2 7067 reet, City, State & 2 6401 reet, City, State & 2	Zip Code	On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3	
N   S   S   F   F   F   F   F   F   F   F	Mr. Cooper 850 Highland Houston, TX 7 Pinc Mortgage Po Box 8703 Dayton, OH 45 Jame, Number, St Suntrust Bk Ta Po Box 3303	reet, City, State & 2 7067 reet, City, State & 2 6401 reet, City, State & 2 Impa Bay	Zip Code	On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number	
N   S   S   F   F   F   F   F   F   F   F	Mr. Cooper 850 Highland Houston, TX 7 Lame, Number, St Pnc Mortgage Po Box 8703 Dayton, OH 45 Lame, Number, St Guntrust Bk Ta	reet, City, State & 2 7067 reet, City, State & 2 6401 reet, City, State & 2 Impa Bay	Zip Code	On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.4	
N   S   S   F   F   F   F   F   F   F   F	Mr. Cooper 850 Highland Houston, TX 7 Pinc Mortgage Po Box 8703 Dayton, OH 45 Jame, Number, St Suntrust Bk Ta Po Box 3303	reet, City, State & 2 7067 reet, City, State & 2 6401 reet, City, State & 2 Impa Bay	Zip Code	On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.4	
	Mr. Cooper 850 Highland Houston, TX 7 Pinc Mortgage Po Box 8703 Dayton, OH 45 Jame, Number, St Suntrust Bk Ta Po Box 3303 Tampa, FL 330 Jame, Number, St	reet, City, State & 2 7067 reet, City, State & 2 6401 reet, City, State & 2 Impa Bay 601 reet, City, State & 2	Zip Code Zip Code	On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.4	
	Mr. Cooper 850 Highland Houston, TX 7 Pinc Mortgage Po Box 8703 Dayton, OH 45 Jame, Number, St Po Box 3303 Fampa, FL 330 Jame, Number, St Vells Fargo Ho	reet, City, State & 2 7067 reet, City, State & 2 6401 reet, City, State & 2 Impa Bay 601 reet, City, State & 2 Impa Bay 601 reet, City, State & 2 Impa Bay 601	Zip Code Zip Code	On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.4  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.5	
N   S   S   S   S   S   S   S   S   S	Mr. Cooper 850 Highland Houston, TX 7 Pinc Mortgage Po Box 8703 Dayton, OH 45 Jame, Number, St Suntrust Bk Ta Po Box 3303 Tampa, FL 330 Jame, Number, St	reet, City, State & 2 7067  reet, City, State & 2 6401  reet, City, State & 2 ampa Bay  601  reet, City, State & 2 ome Mortgage ach Cir	Zip Code Zip Code	On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number  On which line in Part 1 did you enter the creditor? 2.4  Last 4 digits of account number	

Official Form 106D

Fill in this infor	mation to identify your case:							
Debtor 1	Herbert L. Schimkus							
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing)	Patricia A. Schimkus First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the: MID	DLE DISTRICT O	F FLORIDA					
Case number								
(if known)		<u>.</u>					if this is ar	า
						amende	ed filing	
Official Form	m 106E/F							
	E/F: Creditors Who I	Have Unsec	cured Claims				12/1	5
any executory con Schedule G: Exec Schedule D: Credi left. Attach the Co name and case nu	nd accurate as possible. Use Part tracts or unexpired leases that co utory Contracts and Unexpired Le tors Who Have Claims Secured by ntinuation Page to this page. If yo imber (if known).	ould result in a clai ases (Official Forn y Property. If more u have no informa	im. Also list executory contra n 106G). Do not include any c space is needed, copy the Pa	acts on Schedule A/B: reditors with partially art you need, fill it out	Property (Of secured clai number the	ficial Forn ms that ar entries in	n 106A/B) a re listed in the boxes	and on on s on the
	ors have priority unsecured claim							
□ No. Go to	•	is against you.						
Yes.								
identify what to possible, list the Part 1. If more	Ir priority unsecured claims. If a ci ype of claim it is. If a claim has both he claims in alphabetical order accor than one creditor holds a particular nation of each type of claim, see the	priority and nonprior ding to the creditor's claim, list the other	rity amounts, list that claim here s name. If you have more than creditors in Part 3.	and show both priority	and nonpriori	ty amounts	s. As much	as le of
2.1 Internal	I Revenue Service	Last 4 digits	of account number	\$1.00		\$1.00	umount	\$0.00
•	reditor's Name			<del></del>				
	k 21126 elphia, PA 19114-0326	wnen was tr	he debt incurred?		_			
	Street City State Zlp Code	As of the dat	te you file, the claim is: Check	k all that apply				
Who incurre	ed the debt? Check one.	☐ Continger	nt					
Debtor 1	only	☐ Unliquidat	ted					
Debtor 2	only	☐ Disputed						
Debtor 1	and Debtor 2 only	Type of PRIC	ORITY unsecured claim:					
☐ At least o	ne of the debtors and another	☐ Domestic	support obligations					
☐ Check if	this claim is for a community del	t Taxes and	d certain other debts you owe th	ne government				
Is the claim	subject to offset?	☐ Claims for	r death or personal injury while	you were intoxicated				
■ No		Other. Sp						
☐ Yes			2018 tax liability					
Part 2: List A	All of Your NONPRIORITY Uns	ecured Claims						
3. Do any credit	ors have nonpriority unsecured c	laims against you?	?					
☐ No. You ha	ave nothing to report in this part. Sub	omit this form to the	court with your other schedules	s.				
Yes.								
unsecured cla	r nonpriority unsecured claims in im, list the creditor separately for ea itor holds a particular claim, list the c	ch claim. For each c	claim listed, identify what type of	f claim it is. Do not list c	laims already	included in	n Part 1. If	

Total claim

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	r 1 Herbert L. Schimkus r 2 Patricia A. Schimkus		Case number (if known)	
4.1	Amex	Last 4 digits of account number	8783	\$25,057.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim	Opened 11/99 Last Active 1/14/19 s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	+	
4.2	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	5683	\$16,415.00
	4909 Savarese Circle FI1-908-01-50	When was the debt incurred?	Opened 08/16 Last Active 10/18	
	Tampa, FL 33634  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other circilar debte	
	■ No	·		
	Yes	Other. Specify Credit Card	<u>+                                      </u>	
4.3	BayCare Health System  Nonpriority Creditor's Name	Last 4 digits of account number	9135	\$1,571.00
	2985 Drew Street Clearwater, FL 33759	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical+		

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	Herbert L. Schimkus     Patricia A. Schimkus		Case number (if known)	
4.4	Citibank/The Home Depot	Last 4 digits of account number	1569	\$3,833.00
	Nonpriority Creditor's Name Attn: Recover Po Box 790034	When was the debt incurred?	Opened 10/16 Last Active 10/18	
	St Louis, MO 63179  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	ount+	
4.5	Citicards Cbna	Last 4 digits of account number	2681	\$9,018.00
	Nonpriority Creditor's Name Citi Bank Po Box 6077	When was the debt incurred?	Opened 05/08 Last Active 09/18	
,	Sioux Falls, SD 57117 Number Street City State Zlp Code		On Oh and all that are also	
	Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
	□ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card-	<del>†</del>	
4.6	Comenitycb/dtlfirstfin	Last 4 digits of account number	6677	\$1,857.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125	When was the debt incurred?	Opened 05/17 Last Active 09/18	
	Columbus, OH 43218	_		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only			
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	. Julii	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card		

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Debtor 2	1 Herbert L. Schimkus 2 Patricia A. Schimkus	Case number (if known)	
	Dental First Financing Nonpriority Creditor's Name PO Box 659622 San Antonio, TX 78265-9622	Last 4 digits of account number 6677  When was the debt incurred?	\$1,646.00
_	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Dental+	
l I	Freedom Plus	Last 4 digits of account number 8494	\$33,575.00
	Nonpriority Creditor's Name Attn: Bankruptcy 1875 S Grant St, Ste 450 San Mateo, CA 94402	When was the debt incurred? Opened 06/18 Last Active 11/18	
_	Number Street City State ZIp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Unsecured+ cons loan	
	MB Financial Bank	Last 4 digits of account number	\$5,425.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 800 West Madison Street	When was the debt incurred? Opened 07/14 Last Active 08/18	
_	Chicago, IL 60607  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	□ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	2004 Trophy Boats 2352 WA Vin# THMA44FNH304 Surrendered 9/11/18	

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Debtor 1 Debtor 2	Herbert L. Schimkus Patricia A. Schimkus		Case number (if known)	
4.1				
0	Navient	Last 4 digits of account number	0718	\$7,307.00
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 07/03 Last Active	
	Po Box 9000	When was the debt incurred?	12/24/18	
	Wiles-Barr, PA 18773		See Oh and all the standard	-
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	Is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	■ Student loans		
	debt		aration agreement or divorce that you did not	
	s the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		-
		Educational	+	
	Synchrony Bank/Amazon	Last 4 digits of account number	8986	\$1,317.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, El 22806	When was the debt incurred?	Opened 03/14 Last Active 08/18	
	Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
,	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	a plane, and other similar debte	
	■ No □ Yes	·		
	☐ Yes	Other. Specify Charge Acc	ount	
Part 3:	List Others to Be Notified About a De	oht That You Already Listed		
5. Use this is tryin have m notified	s page only if you have others to be notified g to collect from you for a debt you owe to s ore than one creditor for any of the debts th I for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that yomeone else, list the original creditor in lat you listed in Parts 1 or 2, list the addion submit this page.	Parts 1 or 2, then list the collection agency tional creditors here. If you do not have add	y here. Similarly, if you
Name and Amex	d Address	On which entry in Part 1 or Part 2 did you Line <b>4.1</b> of ( <i>Check one</i> ):	list the original creditor?  Part 1: Creditors with Priority Unsecured Clai	ms
	297871	<del></del> ` ′	Part 2: Creditors with Nonpriority Unsecured	
Fort La	uderdale, FL 33329	Last 4 digits of account number	- Tart 2. Greaters with Northholity Orisecured	Olainis
Name and	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	f America	Line 4.2 of (Check one):	$oldsymbol{l}$ Part 1: Creditors with Priority Unsecured Clai	ms
	982238 b, TX 79998	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims
Name and	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	The Home Depot	·	Part 1: Creditors with Priority Unsecured Clai	ms
Po Box	6497	<del></del> :	Part 2: Creditors with Nonpriority Unsecured	
Sioux F	alls, SD 57117	Last 4 digits of account number		
Name and	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	

Official Form 106 E/F

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Debtor 1 Herbert L. Schimkus Debtor 2 Patricia A. Schimkus		Case number (if known)
Citicards Cbna Po Box 6217 Sioux Falls, SD 57117	Line 4.5 of (Check one):  Last 4 digits of account number	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Comenitycb/dtlfirstfin Po Box 182120 Columbus, OH 43218	On which entry in Part 1 or Part 2 did y Line 4.6 of ( <i>Check one</i> ):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Freedom Plus 1875 S Grant St Ste 400 San Mateo, CA 94402	On which entry in Part 1 or Part 2 did the Line 4.8 of (Check one):  Last 4 digits of account number	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address MB Financial Bank 6111 N River Rd Rosemont, IL 60018	On which entry in Part 1 or Part 2 did y Line $\underline{4.9}$ of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Navient 123 S Justison St Wilmington, DE 19801	On which entry in Part 1 or Part 2 did y Line 4.10 of ( <i>Check one</i> ):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Synchrony Bank/Amazon Po Box 965015 Orlando, FL 32896	On which entry in Part 1 or Part 2 did y Line 4.11 of ( <i>Check one</i> ):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1.00
					Total Claim
	6f.	Student loans	6f.	\$	7,307.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	99,714.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	107,021.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Herbert L. Schimk	Middle Name	Last Name	
Debtor 2	Patricia A. Schimk	us		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number _				

#### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Olate	Zii Oodo	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4			<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	City		Olato	211 0000	
-	Name				_
	Number	Street			_
	City		State	ZIP Code	

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				9	
Fill in this	information to identify ye	our case:			
Debtor 1	Herbert L. Schi	mkus			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	Patricia A. Sch	imkus Middle Name	Last Name		
	3,				
United Sta	tes Bankruptcy Court for th	e: MIDDLE DISTRICT OF	FLORIDA		
Case numb	ber				
(if known)					Check if this is an
					amended filing
Official	l Form 106H				
Sched	lule H: Your Co	odebtors			12/15
		<del></del>			.2.10
people are fill it out, a	filing together, both are nd number the entries in	equally responsible for sup	plying correct informat h the Additional Page t	ion. If more space is no	te as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
1. Do <u>:</u>	you have any codebtors?	(If you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes	3				
Arizon  No.	a, California, Idaho, Louisia Go to line 3.	you lived in a community p ana, Nevada, New Mexico, Po spouse, or legal equivalent liv	uerto Rico, Texas, Wash		states and territories include
in line Form	2 again as a codebtor or	nly if that person is a guaraı	ntor or cosigner. Make	sure you have listed th	y with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State a	nd ZIP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D. line	
	Name			Schedule E/F, li	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			□ Schedule E/F, li	· · · · · · · · · · · · · · · · · · ·
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to identify your o	ase.				ı				
	otor 1 Herbert L. S									
	otor 2 Patricia A. S	chimkus			_					
Uni	ted States Bankruptcy Court for the	e: MIDDLE DISTRICT C	OF FLORIDA							
	se number nown)		-					nt show	ring postpetition	chapter
Of	fficial Form 106l						MM / DD/ Y		following date.	
	chedule I: Your Inc	ome					IVIIVI / DD/ T	111		12/15
sup <sub>i</sub> spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse de infor	is liv mati	ing v on al	vith you, inclu oout your spo	ıde info use. If r	rmation about more space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-	-filing spouse	
	If you have more than one job,	Employment status	☐ Employed			■ Employed				
	attach a separate page with information about additional	Employment status	■ Not employed			☐ Not employed				
	employers.	Occupation	Social Security				Network	Compl	liance Manage	er
	Include part-time, seasonal, or self-employed work.	Employer's name					AT&T M	lobility		
	Occupation may include student or homemaker, if it applies.	Employer's address					PO Box Austin,		-	
		How long employed t	here?					.5 years	S	
<b>Esti</b> spou	mate monthly income as of the cuse unless you are separated.  u or your non-filing spouse have me space, attach a separate sheet to	late you file this form. If			-	oyers		n on the	·	-
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	6,723.00	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$_	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$		0.00	\$	6,723.00	

Debt Debt		Patricia A. Schimkus		Case	e number ( <i>if known</i> )			
				Fo	r Debtor 1		ebtor 2 or iling spouse	
	Cop	by line 4 here	4.	\$_	0.00	\$	6,723.00	
5.	List	all payroll deductions:						
	5a. 5b. 5c.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5a. 5b. 5c.	\$_ \$_ \$_	0.00 0.00 0.00	\$  \$	1,342.00 0.00 425.00	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$ \$ \$	0.00	\$ 	0.00	
	5f. 5g. 5h.	Domestic support obligations Union dues Other deductions Specific averts angues // RR proty husband inc	5f. 5g. 5h.+	\$_ \$_ \$_	0.00	\$  + \$	0.00	
	JII.	Other deductions. Specify: work spouse/LRP pretx-husband ins HSA Voluntary Benefits aftxvehicle insurance	5ii.+ 	\$_ \$_	0.00 0.00 0.00	\$ 	100.00 250.00 344.00	
		Employee giving		\$_	0.00	\$	8.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	2,629.00	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	4,094.00	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$_	0.00	\$	0.00	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8b. 1 <b>t</b> 8c.	\$_ \$	0.00	\$ \$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e. 8f.	Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8e. ce 8f.	\$_ \$	2,247.00	\$ \$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
9.	8h.	Other monthly income. Specify:  d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8h.+ 9.	\$_ \$_	2,247.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,247.00 + \$_	4,09	94.00 = \$	6,341.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedul ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ur depen		•		hedule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certilies					·	6,341.00
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	m?				Combin monthly	ed income

Debtor 1 Herbert L. Schimkus						_			
Debtor 2 Patricia A. Schimkus    Patricia A. Schimkus   Patricia A.	Fill in this	information to identify yo	our case:						
Detection 2   Patricia A. Schimkus   A supplemental sweepness as of the following date:	Debtor 1	Herbert L. Sc	himkus			_		filing	
United States Bankruptcy Count for the: MIDDLE DISTRICT OF FLORIDA    MM / DD / YYYY			himkus			_	A supplemen	t showing postpetition cha	apter
Official Form 106J Schedule J: Your Expenses  12/11  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part I: Describe Your Household  I is this a joint case?  No, Go to line 2.  Yes, Debtor 2 live in a separate household?  No  On on list Debtor 1 and Pyes, Fill out this information for each dependent.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Part I: Describe Your Mousehold I Pyes, Fill out this information for beator 2 age live with you?  Do not state the dependent names.  No  Yes  No  No  Yes  Statinate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptry filing date unless you are using this form as a supplement in a Chapter 13 case to report yes and your dependent and your dependent and your dependent and your dependent point and your dependent point of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 1061)  The rental or home ownership expenses for your residence, include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4b. \$ 0.00  4c. Home maintenance, repair, and upkeep expenses  4c. \$ 0.00  4d. Home maintenance, repair, and upkeep expenses		37	: MIDDLE	E DISTRICT OF FLORIDA					
Official Form 106J Schedule J: Your Expenses  12/11  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part I: Describe Your Household  I is this a joint case?  No, Go to line 2.  Yes, Debtor 2 live in a separate household?  No  On on list Debtor 1 and Pyes, Fill out this information for each dependent.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Part I: Describe Your Mousehold I Pyes, Fill out this information for beator 2 age live with you?  Do not state the dependent names.  No  Yes  No  No  Yes  Statinate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptry filing date unless you are using this form as a supplement in a Chapter 13 case to report yes and your dependent and your dependent and your dependent and your dependent point and your dependent point of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 1061)  The rental or home ownership expenses for your residence, include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4b. \$ 0.00  4c. Home maintenance, repair, and upkeep expenses  4c. \$ 0.00  4d. Home maintenance, repair, and upkeep expenses	Case numb	her			_				
Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Ratt     Describe Your Household									
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:	Officia	al Form 106J							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:	Sche	dule J: Your l	Exper	ises					12/1
1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No Onot list Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents? No Do not list Debtor 1 and Yes. Do not list Debtor 1 and Onot list Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do not list Debtor 1 and Yes. Do not list Debtor 1 and One of Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do not list Debtor 1 and Yes. Do not state the dependents names.  Dependent's relationship to Dependent's age No Yes No Yes No Yes No Yes No Yes Stiff and your expenses include expenses of people other than yes presses of people othe	Be as con informati number (	mplete and accurate as ion. If more space is ne (if known). Answer ever	possible. eded, atta y questio	If two married people are ch another sheet to this t					
Yes. Does Debtor 2 live in a separate household?    No			noiu						
No   Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents? No Do not list Debtor 1 and Debtor 2.   Do not list Debtor 1 and Debtor 2.   Do not state the dependents names.   Dependent live with you?	□N	lo. Go to line 2.							
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?	■ Y	es. <b>Does Debtor 2 live i</b>	n a separ	ate household?					
Do not list Debtor 1 and			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Do	ebtor 2.		
Do not list Debtor 1 and	2. <b>Do v</b>	ou have dependents?	■ No						
dependents names.    Yes   No   No   Yes   No   No   Yes   Yes   No   Yes   Yes   Yes   Yes   Yes   No   Yes	Do n	not list Debtor 1 and	_				•		t
No   Yes   Yes   Yes   No   Yes	Do n	not state the						□ No	
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  If not included in line 4:  4. \$ 1,674.00  If not included in line 4:  4. Real estate taxes  4a. \$ 0.00  4b. \$ 0.00  4c. Home maintenance, repair, and upkeep expenses  4c. \$ 360.00  4d. Homeowner's association or condominium dues  4d. \$ 20.00	depe	endents names.							
3. Do your expenses include expenses of people other than yourself and your dependents?    Part 2:   Estimate Your Ongoing Monthly Expenses								— · · · ·	
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. Real estate taxes  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues  4d. Society of None (None) (None (None) (No									
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$  0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues								Yes	
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$  0.00  4b. Property, homeowner's, or renter's insurance  4c. \$  360.00  4d. Homeowner's association or condominium dues  4d. \$  20.00									
expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 1061.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  360.00  4d. Homeowner's association or condominium dues	3. <b>Do v</b>	our expenses include	_	NI-				U Yes	
Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  10.00	expe	enses of people other the	han $_{f \Box}$	* * *					
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  360.00  4d. Homeowner's association or condominium dues	your	rself and your depende	nts?	103					
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  Your expenses  4. \$ 1,674.00  4. \$ 0.00	Estimate expenses	your expenses as of your expenses as of your expenses as of a date after the b	our bankrı	uptcy filing date unless y					
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$   1,674.00  4a. \$  0.00  4b. \$  0.00  4c. Home maintenance, repair, and upkeep expenses  4d. \$  20.00	the value	of such assistance and					You	ır expenses	
payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  4d. \$ 1,674.00  4a. \$ 0.00  4b. \$ 0.00  4c. Homeowner's association or condominium dues  4d. \$ 20.00	(Onicial I	FOITH 1001.)					. 00		
4a.Real estate taxes4a. \$0.004b.Property, homeowner's, or renter's insurance4b. \$0.004c.Home maintenance, repair, and upkeep expenses4c. \$360.004d.Homeowner's association or condominium dues4d. \$20.00	4. The payr	rental or home owners ments and any rent for the	<b>hip expen</b> e ground o	ses for your residence. In	nclude first mortgage	e 4.	\$	1,674.00	
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  20.00	If no	ot included in line 4:							
4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 360.00 20.00	4a.	Real estate taxes				4a.	\$	0.00	
4d. Homeowner's association or condominium dues 4d. \$ 20.00						4b.	\$	0.00	
							·		
					me equity loans				

	tor 1 tor 2		Schimkus Schimkus	Case num	ber (if known)	
6.	Utiliti					
	6a.	Electricity,	heat, natural gas	6a.	\$	247.00
	6b.		ver, garbage collection	6b.	\$	170.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	6d.	Other. Spe	ecify: Cable Bundle/DTV	6d.	\$	100.00
		Lawn Ser		_	\$	140.00
		Cellular F	Phone Service		\$	254.00
		Pest Con	trol	_	\$	35.00
			Water System		\$	66.00
7.	Food	and house	ekeeping supplies		\$	750.00
8.	Child	lcare and c	hildren's education costs	8.	\$	0.00
9.	Cloth	ning, laund	ry, and dry cleaning	9.	\$	175.00
10.	Perso	onal care p	roducts and services	10.	\$	165.00
11.	Medi	cal and der	ntal expenses	11.	\$	250.00
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.			
			ar payments.	12.	·	370.00
13.	Enter	rtainment, (	clubs, recreation, newspapers, magazines, and books	13.	\$	185.00
14.	Char	itable cont	ributions and religious donations	14.	\$	225.00
15.	Insur					
			surance deducted from your pay or included in lines 4 or 20.		_	
		Life insura		15a.	· —	0.00
		Health ins		15b.		0.00
		Vehicle ins		15c.	·	0.00
			rance. Specify:	15d.	\$	0.00
16.	Taxe: Speci		clude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17.	Insta	Ilment or le	ease payments:			
	17a.	Car payme	ents for Vehicle 1	17a.	\$	357.60
	17b.	Car payme	ents for Vehicle 2	17b.	\$	237.60
	17c.	Other. Spe	ecify:	17c.	\$	0.00
	17d.	Other. Spe	ecify:	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not report as your pay on line 5, Schedule I, Your Income (Official Form 106I).	 18.	\$	0.00
19.			s you make to support others who do not live with you.		\$	0.00
	Speci		, , , , , , , , , , , , , , , , , , , ,	19.	· -	
20.	Othe	r real prope	erty expenses not included in lines 4 or 5 of this form or on Sched	ule I: Yo	our Income.	
	20a.	Mortgages	on other property	20a.	\$	0.00
	20b.	Real estate	e taxes	20b.	\$	0.00
	20c.	Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:	Pet Care-4 elderly and sickly dogs, 1 cat & turtles	21.		250.00
		. ,	christmas decor, baby clothes, kids toys	_	+\$	80.00
	vitan		ormaniae accor, baby dictired, had toye	_	+\$	100.00
						100.00
22.			monthly expenses			
	22a. /	Add lines 4	through 21.		\$	6,211.20
	22b. (	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. /	Add line 22a	a and 22b. The result is your monthly expenses.		\$	6,211.20
23.	Calcu	ulate your r	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	6,341.00
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	6,211.20
	23c.		our monthly expenses from your monthly income. is your monthly net income.	23c.	\$	129.80
24.	For ex	ample, do yo	an increase or decrease in your expenses within the year after you u expect to finish paying for your car loan within the year or do you expect your materms of your mortgage?	file this	s form? payment to increas	e or decrease because of a
	■ No	ο.				
	□Y€	es.	Explain here:			

Fill in this informat	ion to identify your ca	ise:			
Debtor 1	Herbert L. Schimkus	3			
-	First Name	Middle Name	Last Name		
_	Patricia A. Schimkus				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankr	uptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case number				☐ Check if this is an amended filing	
Official Form C		า Individual	Debtor's Schedu	les 12/15	
f two married peop	le are filing together,	both are equally respo	onsible for supplying correct inform	nation.	
obtaining money or	property by fraud in 6 .S.C. §§ 152, 1341, 15	connection with a banl		false statement, concealing property, or to \$250,000, or imprisonment for up to 20	
Did you pay o	r agree to pay someor	ne who is NOT an attor	rney to help you fill out bankruptcy	forms?	
■ No					
☐ Yes. Nam	Yes. Name of person  Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 11)				
Under penalty that they are tr		at I have read the sum	nmary and schedules filed with this	declaration and	
X /s/ Herber	t L. Schimkus				
	Schimkus		X /s/ Patricia A. Schimk	cus	
			Patricia A. Schimkus	cus	
Signature o	f Debtor 1			us	

Fill in th	nis information to identify you	r case:						
Debtor '								
Debtor 2	First Name	Middle Name	Last Name					
(Spouse if	T dillold 71. Collilli	Middle Name	Last Name					
United S	States Bankruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA					
Case nu	ımhar							
(if known)				_	check if this is an mended filing			
	al Form 107 ment of Financial	Affairs for Individ	luals Filing for B	ankruntev	4/16			
Be as co	omplete and accurate as possition. If more space is needed, (if known). Answer every que	ble. If two married people a	re filing together, both are	equally responsible for sup	plying correct			
Part 1:	Give Details About Your Ma	arital Status and Where You	Lived Before					
1. Wh	What is your current marital status?							
	■ Married							
	Not married							
2. Dur	During the last 3 years, have you lived anywhere other than where you live now?							
	No							
	Yes. List all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	٧.				
De	btor 1 Prior Address:	Dates Debtor 1	Debtor 2 Prior Address:		Dates Debtor 2			
	38 Colleen Street irasota, FL 34231	From-To: 7/2015-8/2016	Same as Debtor	1	Same as Debtor 1 From-To:			
Part 2  4. Did Fill	hin the last 8 years, did you end territories include Arizona, Cannot No Yes. Make sure you fill out School Explain the Sources of You you have any income from end in the total amount of income you are filing a joint case and you No Yes. Fill in the details.	lifornia, Idaho, Louisiana, Nembedule H: Your Codebtors (Of ar Income In	wada, New Mexico, Puerto R ficial Form 106H).  g a business during this yould businesses, including part	ico, Texas, Washington and Western and Western activities.	/isconsin.)			
		Debtor 1		Debtor 2				
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
	anuary 1 of current year until e you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$6,722.84			
		☐ Operating a business		☐ Operating a business				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 1

#### Case 8:19-bk-00786-RCT Doc 1 Filed 01/30/19 Page 36 of 67

Debtor 1 Herbert L. Schimkus  Debtor 2 Patricia A. Schimkus  Car				Case number (if known)	ase number (if known)			
	Date	- 4		Dalita a O				
		es of income all that apply.	Gross income (before deductions are exclusions)	Sources of inc Check all that		uctions		
For last calendar year: (January 1 to December 31, 20	bonuse	ges, commissions, es, tips	\$74,014.	bonuses, tips	Timiosiono,	601.00		
	□ Оре	erating a business		☐ Operating a	a business			
For the calendar year before t (January 1 to December 31, 20	117\ — Wa	ges, commissions, es, tips	\$118,673.	00 ■ Wages, cor bonuses, tips	mmissions, \$71,	834.00		
	□ Оре	erating a business		Operating a	a business			
winnings. If you are filing a j  List each source and the gro  No  Yes. Fill in the details.	oint case and yo	ou have income that	you received together, lis	st it only once under D		- ··,		
	Debtor	r 1		Debtor 2				
	Source	es of income be below.	Gross income from each source (before deductions at exclusions)	Sources of inc Describe below		uctions		
From January 1 of current yea the date you filed for bankrup		Security	\$2,247.	00				
For last calendar year: (January 1 to December 31, 20	Social	Security	\$8,744.	00				
Part 3: List Certain Paymen	its You Made B	sefore You Filed for	Bankruntov					
6. Are either Debtor 1's or D	ebtor 2's debts 1 nor Debtor 2	primarily consume	er debts? sumer debts. Consumer	debts are defined in 1	1 U.S.C. § 101(8) as "incurre	ed by an		
· ·		iled for bankruptcy, c	lid you pay any creditor a	total of \$6,425* or mo	ore?			
paid not	obligations, such as c	lyments and the total amount hild support and alimony. Als						
* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.  Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
■ No. Go	to line 7.							
☐ Yes List inclu	below each cree	or domestic support o			t you paid that creditor. Do no Also, do not include paymer			
Creditor's Name and Add	ress	Dates of payme	ent Total amoun		Was this payment for			

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Debto Debto			Cas	e number (if known)		
li o a	Vithin 1 year before you filed for bankruptonsiders include your relatives; any general part of which you are an officer, director, person in business you operate as a sole proprietor. 1 limony.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general p ny managing age	partner; corporation ent, including one fo
	■ No □ Yes. List all payments to an insider.					
ı	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment
ii	Vithin 1 year before you filed for bankruptonsider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a deb	t that benefited an
	No Yes. List all payments to an insider					
_	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	
Part 4	4: Identify Legal Actions, Repossession	as and Faranlacuras	pula	Juli Owo	morado ordano	i o name
m 	ist all such matters, including personal injury nodifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number	Nature of the case	Court or agency		Status of the	
C	Vithin 1 year before you filed for bankrupt. Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached, s	seized, or levied?
•	Creditor Name and Address	Describe the Property		Date		Value of the property
	MB Financial Bank Attn: Bankruptcy Dept. 800 West Madison Street Chicago, IL 60607	Explain what happene Recreational+ Boat surrendered 9/1  Property was reposs  Property was foreclo	1/18 essed. sed.	9/11/	/18	\$0.00
		☐ Property was garnish				
	Vithin 90 days before you filed for bankrup		<u> </u>	nancial institutior	n, set off any am	ounts from
I	No Yes. Fill in the details.	ause you owed a debt!				
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amoun
	Vithin 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess			of creditors, a
	■ No □ Yes					
_						

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Debtor	<ul><li>1 Herbert L. Schimkus</li><li>2 Patricia A. Schimkus</li></ul>	Case numb	Der (if known)	
Part 5:	List Certain Gifts and Contributions	s		
13. <b>W</b> i ■	No	uptcy, did you give any gifts with a total value of more	e than \$600 per person	?
G po	ifts with a total value of more than \$600 er person erson to Whom You Gave the Gift and	0 Describe the gifts	Dates you gave the gifts	Value
		uptcy, did you give any gifts or contributions with a to	otal value of more than	\$600 to any charity?
m C	ifts or contributions to charities that to lore than \$600 harity's Name ddress (Number, Street, City, State and ZIP Code	otal Describe what you contributed	Dates you contributed	Value
	he Chapel and Queen of Peace Chui		monthly	\$200.00
				<b>***</b>
Part 6:		give monthly donation	monthly  nything because of the	·
Part 6: 15. Wi	List Certain Losses  Ithin 1 year before you filed for bankrup gambling?	give monthly donation  ptcy or since you filed for bankruptcy, did you lose a	,	\$25.00 ft, fire, other disaster,
Part 6: 15. Wi or	List Certain Losses ithin 1 year before you filed for bankrup gambling?  No Yes. Fill in the details.	ptcy or since you filed for bankruptcy, did you lose a	nything because of the	ft, fire, other disaster,
Part 6:  15. Wi or	List Certain Losses  ithin 1 year before you filed for bankrug gambling?  No Yes. Fill in the details.  escribe the property you lost and ow the loss occurred		nything because of the	· 
Part 6:  15. Wi or	List Certain Losses  ithin 1 year before you filed for bankrug gambling?  No Yes. Fill in the details.  escribe the property you lost and ow the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	nything because of the	ft, fire, other disaster,
Part 6:  15. Wi or  Dho  Part 7:	List Certain Losses  ithin 1 year before you filed for bankrup gambling?  No Yes. Fill in the details.  escribe the property you lost and ow the loss occurred  List Certain Payments or Transfers  ithin 1 year before you filed for bankrup insulted about seeking bankruptcy or p	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	nything because of thei	ft, fire, other disaster,  Value of property lost
Part 6:  15. Wi or  Dho  Part 7:	List Certain Losses  Ithin 1 year before you filed for bankrup gambling?  No Yes. Fill in the details.  Rescribe the property you lost and low the loss occurred  List Certain Payments or Transfers  Ithin 1 year before you filed for bankrup insulted about seeking bankruptcy or politicle any attorneys, bankruptcy petition property.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  ptcy, did you or anyone else acting on your behalf papereparing a bankruptcy petition?	nything because of thei	ft, fire, other disaster,  Value of property lost
Part 6:  15. Wi or  Dho  Cooling	List Certain Losses  ithin 1 year before you filed for bankrup gambling?  No Yes. Fill in the details.  escribe the property you lost and ow the loss occurred  List Certain Payments or Transfers ithin 1 year before you filed for bankrup insulted about seeking bankruptcy or polude any attorneys, bankruptcy petition produced.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Detcy, did you or anyone else acting on your behalf paperparing a bankruptcy petition?  reparers, or credit counseling agencies for services required.  Description and value of any property transferred	nything because of thei	ft, fire, other disaster,  Value of property lost

	otor 1 Herbert L. Schimkus Patricia A. Schimkus		Ca	se number (	if known)	
17.	Within 1 year before you filed for bankruptopromised to help you deal with your creditor.  Do not include any payment or transfer that you  No	rs or to make payments			r transfer any prop	erty to anyone who
	☐ Yes. Fill in the details.  Person Who Was Paid  Address	Description and v transferred	alue of any proper	ty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupte transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have alread to the course of the c	usiness or financial affa ade as security (such as t	airs? the granting of a sec			
	Person Who Received Transfer Address Person's relationship to you	Description and v			iny property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro  ■ No □ Yes. Fill in the details.		y property to a sel	f-settled tru	st or similar device	e of which you are a
	Name of trust	Description and v	alue of the propert	y transferre	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	strumonte Safo Donocii	Poyos and Storae	no Unite		illaue
20.	Within 1 year before you filed for bankrupton sold, moved, or transferred? Include checking, savings, money market, on houses, pension funds, cooperatives, association.	r other financial accou	nts; certificates of			
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer
	Wells Fargo Bank NA PO Box 6995 Portland, OR 97228-6995	<b>XXXX-</b> 9291	■ Checking □ Savings □ Money Market □ Brokerage □ Other	1/1	8/19	\$0.00
	Wells Fargo Bank NA PO Box 6995 Portland, OR 97228-6995	<b>XXXX-</b> 2822	☐ Checking ■ Savings ☐ Money Market ☐ Brokerage ☐ Other	8/1	0/18	\$0.00
	Wells Fargo Bank NA PO Box 6995 Portland, OR 97228-6995	<b>XXXX-</b> 7325	■ Checking □ Savings □ Money Market □ Brokerage □ Other	9/4	/18	\$0.00

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Debtor 2 Patricia A. Schimkus	Case number (if known)				
Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Wells Fargo Bank NA PO Box 6995 Portland, OR 97228-6995	<b>XXXX-</b> 4958	☐ Checking ■ Savings ☐ Money Ma ☐ Brokerage ☐ Other		9/4/18	\$0.00
Wells Fargo Bank NA PO Box 6995 Portland, OR 97228-6995	<b>XXXX-</b> 5910	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		8/10/18	\$0.00
<ol> <li>Do you now have, or did you have within cash, or other valuables?</li> </ol> No	1 year before you filed t	for bankruptcy, a	any safe de	posit box or other depo	sitory for securities,
☐ Yes. Fill in the details.					
Name of Financial Institution	Who else had a	1- 110	Dagarila		Do you still
Address (Number, Street, City, State and ZIP Code)		r, Street, City,	Describe	the contents	have it?
Address (Number, Street, City, State and ZIP Code)  2. Have you stored property in a storage uni  No Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)	Address (Numbe State and ZIP Code) it or place other than yo Who else has o to it? Address (Numbe	r, Street, City, our home within	1 year befo		have it?
<ul> <li>2. Have you stored property in a storage uni</li> <li>No</li> <li>Yes. Fill in the details.</li> <li>Name of Storage Facility</li> </ul>	Address (Numbe State and ZIP Code) it or place other than yo Who else has o to it?	r, Street, City, our home within or had access r, Street, City, kus Dr ey, FL 34652 kus Dr	Describe  househouseasona valued a grandch	e the contents  old items, pictures, al decorations at \$100 ildrens bikes, toy setche storage unit, sports	have it?  tcy?  Do you still
2. Have you stored property in a storage uni  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Sentry Mini Storage Rt 19	Address (Numbe State and ZIP Code) it or place other than you will be state and ZIP Code) it or place other than you will be state and ZIP Code) Herbert Schim 4049 Headsail New Port Rich Patricia Schim 4049 Headsail New Port Rich ol for Someone Else	r, Street, City, our home within our had access r, Street, City, kus Dr ey, FL 34652 kus Dr ey, FL 34652	Describe househo seasona valued a grandch also in the	e the contents  old items, pictures, al decorations at \$100 ildrens bikes, toy setche storage unit, sports ent	have it?  Do you still have it?  No Yes
2. Have you stored property in a storage uni  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Sentry Mini Storage Rt 19 New Port Richey, FL 34652  Part 9: Identify Property You Hold or Control of Someone.	Address (Numbe State and ZIP Code) it or place other than you will be state and ZIP Code) it or place other than you will be state and ZIP Code) Herbert Schim 4049 Headsail New Port Rich Patricia Schim 4049 Headsail New Port Rich ol for Someone Else	r, Street, City, our home within our had access r, Street, City, kus Dr ey, FL 34652 kus Dr ey, FL 34652	Describe househo seasona valued a grandch also in the	e the contents  old items, pictures, al decorations at \$100 ildrens bikes, toy setche storage unit, sports ent	have it?  Do you still have it?  No Yes

Debtor 1 Herbert L. Schimkus Debtor 2 Patricia A. Schimkus

Case number (if known)

Part 10:	Give Details About Environmental Information

For	the p	purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
		zardous material means anything an environi ardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic	substance,			
Rep	ort a	all notices, releases, and proceedings that yo	u know about, regardless of when	they occurred.				
24.	Has	s any governmental unit notified you that you	ı may be liable or potentially liable ı	under or in violation of an environm	ental law?			
		No Yes. Fill in the details.						
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Hav	ve you notified any governmental unit of any	release of hazardous material?					
		No						
		Yes. Fill in the details.						
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Hav	ve you been a party in any judicial or adminis	trative proceeding under any envir	onmental law? Include settlements	and orders.			
		No Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11:	Give Details About Your Business or Con	nections to Any Business					
27.	Wit	hin 4 years before you filed for bankruptcy, c	lid you own a business or have any	of the following connections to an	y business?			
		☐ A sole proprietor or self-employed in a t	•	•	•			
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership	. ,	` ,				
		☐ An officer, director, or managing execut	ive of a corporation					
		☐ An owner of at least 5% of the voting or equity securities of a corporation						

Address (Number, Street, City, State and ZIP Code) Name

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business Employer Identification number
Do not include Social Security n

Do not include Social Security number or ITIN.

Name of accountant or bookkeeper

Dates business existed

**Business Name** 

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Debtor 1	Herbert L. Schimkus
Debtor 2	Patricia A. Schimkus

Case number (if known)

28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial
	institutions, creditors, or other parties.

	N	c

☐ Yes.	Fill in	the	details	below
--------	---------	-----	---------	-------

Name	Date Issued
1 1411110	24.0.00404
Address	
(Number, Street, City, State and ZIP Code)	

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Debtor 1 Herbert L. Schimkus		
Debtor 2 Patricia A. Schimkus		Case number (if known)
Part 12: Sign Below		
I have read the answers on this Stateme	ent of Financial Affairs ar	nd any attachments, and I declare under penalty of perjury that the answers
		t, concealing property, or obtaining money or property by fraud in connection
with a bankruptcy case can result in fin 18 U.S.C. §§ 152, 1341, 1519, and 3571.	es up to \$250,000, or imp	prisonment for up to 20 years, or both.
,,,,,		
/s/ Herbert L. Schimkus	/s/ Pat	atricia A. Schimkus
Herbert L. Schimkus	Patric	cia A. Schimkus
Signature of Debtor 1	Signat	ture of Debtor 2
Date January 30, 2019	Date	January 30, 2019
Did you attach additional pages to You	r Statement of Financial A	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		, , , ,
□ Yes		
Did you pay or agree to pay someone w	ho is not an attorney to l	help you fill out bankruptcy forms?
■ No		
☐ Yes. Name of Person Attach th	e Bankruptcy Petition Pred	parer's Notice, Declaration, and Signature (Official Form 119).

				· ·	
Fill in this infor	mation to identify you	ur case:			
Debtor 1	Herbert L. Schim	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Patricia A. Schin	NKUS Middle Name	Last Name		
United States Ba	ankruptcy Court for the	: MIDDLE DISTRICT OF	FLORIDA		
Case number (if known)					ck if this is an ended filing
Official Fo		on for Individ	uals Filing Unde	er Chapter 7	12/15
If you are an ind		hapter 7, you must fill out		n Oliuptoi i	12/13
-		y and the lease has not ex t within 30 days after you	-	or by the date set for the meetir	ng of creditors,

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Achieva CU name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property Securing debt: 2016 Chevrolet Trax 15,500 miles NADA Average Trade Value	<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	■ Yes
Creditor's Mr. Cooper	■ Surrender the property.	■ No
name:  Description of property 34231 Sarasota County securing debt:  house was listed for sale and didn't sell. It was listed for \$266,000.00 and it was listed for 6 months	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	☐ Yes
Creditor's Pnc Mortgage name:	<ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>	■ No □ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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	ert L. Schimkus sia A. Schimkus	Case number (if known)				
Description of property securing debt:	1738 Colleen Street Sarasota, FL 34231 Sarasota County house was listed for sale and didn't sell. It was listed for \$266,000.00 and it was listed for 6 months	<ul><li>□ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>				
Creditor's Suname:  Description of property securing debt:	untrust Bk Tampa Bay  2011 Chevrolet Colorado 80,000  miles  NADA Average Trade Value	<ul> <li>☐ Surrender the property.</li> <li>☐ Retain the property and redeem it.</li> <li>■ Retain the property and enter into a Reaffirmation Agreement.</li> <li>☐ Retain the property and [explain]:</li> </ul>	□ No ■ Yes			
Creditor's W name:  Description of property securing debt:	fells Fargo Home Mortgage  4049 Headsail Dr New Port Richey, FL 34652 Pasco County value obtained through Realtor.com	<ul> <li>☐ Surrender the property.</li> <li>☐ Retain the property and redeem it.</li> <li>■ Retain the property and enter into a Reaffirmation Agreement.</li> <li>☐ Retain the property and [explain]:</li> </ul>	□ No ■ Yes			
	ur Unexpired Personal Property Leases d personal property lease that you listed	I in Schedule G: Executory Contracts and Unexp	ired Leases (Official Form 106G), fill			
in the information You may assume	an unexpired personal property lease if	nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended. p)(2).			
in the information You may assume Describe your un			the lease period has not yet ended. p)(2). Will the lease be assumed?			
in the information You may assume  Describe your un  Lessor's name:  Description of lea	an unexpired personal property lease if nexpired personal property leases		the lease period has not yet ended. p)(2).			
in the information You may assume  Describe your un  Lessor's name:	an unexpired personal property lease if nexpired personal property leases		the lease period has not yet ended. p)(2). Will the lease be assumed?			
in the information You may assume  Describe your un  Lessor's name:  Description of lead Property:  Lessor's name:	an unexpired personal property lease if nexpired personal property leases		the lease period has not yet ended. p)(2).  Will the lease be assumed?  No			
in the information You may assume  Describe your un  Lessor's name:  Description of lead  Property:	an unexpired personal property lease if nexpired personal property leases		the lease period has not yet ended. p)(2).  Will the lease be assumed?  No Yes			
in the information You may assume  Describe your unterpretation of lear Property:  Lessor's name: Description of lear Property:  Lessor's name: Description of lear Property:	an unexpired personal property lease if nexpired personal property leases  sed		the lease period has not yet ended.  p)(2).  Will the lease be assumed?  No Yes  No			
in the information You may assume  Describe your unterpretation of lear Property:  Lessor's name:  Description of lear Property:	an unexpired personal property lease if nexpired personal property leases  sed		the lease period has not yet ended.  p)(2).  Will the lease be assumed?  No Yes  No Yes			
in the information You may assume  Describe your und Lessor's name: Description of lea Property:	an unexpired personal property lease if nexpired personal property leases sed sed		the lease period has not yet ended.  p)(2).  Will the lease be assumed?  No Yes  No Yes  No No			
in the information You may assume  Describe your und Lessor's name: Description of lea Property:  Lessor's name: Description of lea Property:  Lessor's name: Description of lea Property:	an unexpired personal property lease if nexpired personal property leases sed sed		the lease period has not yet ended.  p)(2).  Will the lease be assumed?  No Yes  No Yes  No Yes  No Yes			
in the information You may assume  Describe your und Lessor's name: Description of lea Property:	an unexpired personal property lease if nexpired personal property leases sed sed		the lease period has not yet ended.  p)(2).  Will the lease be assumed?  No Yes No Yes No Yes No No No			
in the information You may assume  Describe your und Lessor's name: Description of lea Property:	an unexpired personal property lease if nexpired personal property leases sed sed sed		the lease period has not yet ended.  p)(2).  Will the lease be assumed?  No Yes No Yes No Yes No Yes No Yes			
in the information You may assume  Describe your und Lessor's name: Description of lea Property:	an unexpired personal property lease if nexpired personal property leases sed sed sed		the lease period has not yet ended. p)(2).  Will the lease be assumed?  No Yes			
in the information You may assume  Describe your und Lessor's name: Description of lead Property:  Lessor's name: Description of lead Property:	an unexpired personal property lease if nexpired personal property leases sed sed sed sed		the lease period has not yet ended. p)(2).  Will the lease be assumed?  No Yes			
in the information You may assume  Describe your und Lessor's name: Description of lead Property:  Lessor's name: Description of lead Property:	an unexpired personal property lease if nexpired personal property leases sed sed sed sed		the lease period has not yet ended. p)(2).  Will the lease be assumed?  No Yes			

Official Form 108

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Debto		
Debto	r 2 Patricia A. Schimkus	Case number (if known)
Descr	iption of leased	
Prope	•	☐ Yes
Part 3	Sign Below	
	penalty of perjury, I declare that I have indicated my intent rty that is subject to an unexpired lease.	ion about any property of my estate that secures a debt and any personal
<b>X</b> /	s/ Herbert L. Schimkus	X /s/ Patricia A. Schimkus
<b>*</b> -	s/ Herbert L. Schimkus Herbert L. Schimkus	X /s/ Patricia A. Schimkus Patricia A. Schimkus
Ī		

Fill in	this information to identify your case:						irected	in this form and i	n Form
Debt	or 1 Herbert L. Schimkus			12:	2A-1Su	pp:			
Debt					□ 1. TI	nere is no pres	umptior	n of abuse	
	se, if filing)				■ 2. TI	ne calculation t	o deter	mine if a presum	otion of abuse
Unite	d States Bankruptcy Court for the: Middle District	of Florid	da		а	pplies will be n	nade ur	nder Chapter 7 M	
	number					Calculation (Offi		,	
(if knov	wii)							ot apply now bec e but it could app	
<b>○</b> ŧŧ:	sial Farma 400A - 4				☐ Che	eck if this is a	n ame	nded filing	
	cial Form 122A - 1		. 4 84 41			_			
Cha	apter 7 Statement of Your C	<u>urre</u>	nt Wonth	iy inc	ome	<del></del>			12/15
attach case n	complete and accurate as possible. If two married peop a separate sheet to this form. Include the line number is umber (if known). If you believe that you are exempted ring military service, complete and file Statement of Extended Calculate Your Current Monthly Income	to which from a p	the additional inf presumption of ab	ormation a	applies. se you	On the top of and	ny addit narily co	ional pages, write onsumer debts or	your name and because of
1.	What is your marital and filing status? Check one	e only.							
	☐ Not married. Fill out Column A, lines 2-11.								
	■ Married and your spouse is filing with you. Fi	ll out bo	th Columns A an	d B, lines	2-11.				
	☐ Married and your spouse is NOT filing with yo	ou. You	and your spous	se are:					
	☐ Living in the same household and are not l	egally s	separated. Fill ou	t both Co	lumns /	A and B, lines 2	2-11.		
	☐ Living separately or are legally separated. I penalty of perjury that you and your spouse a living apart for reasons that do not include even	re legal	ly separated unde	er nonban	kruptcy	law that applie	es or th		
10 <sup>s</sup> the	I in the average monthly income that you received from 1(10A). For example, if you are filing on September 15, the 6 months, add the income for all 6 months and divide the touses own the same rental property, put the income from the	6-month total by 6	period would be Manager Fill in the result. D	arch 1 thro	ugh Aug de any ir	ust 31. If the amo	ount of your	our monthly income once. For example	varied during , if both
					Colum			mn B or 2 or filing spouse	
	Your gross wages, salary, tips, bonuses, overtin payroll deductions).	ne, and	commissions (	pefore all	\$	15.26	\$	6,722.84	
	Alimony and maintenance payments. Do not inclu Column B is filled in.	ıde pay	ments from a spo	ouse if	\$	0.00	\$	0.00	
	All amounts from any source which are regularly of you or your dependents, including child supp from an unmarried partner, members of your housel and roommates. Include regular contributions from a filled in. Do not include payments you listed on line:	ort. Incl hold, yo a spous	lude regular cont ur dependents, p	ributions arents,	\$	0.00	\$	0.00	
5.	Net income from operating a business, profession	on, or fa							
		•	Debtor 1						
	Cross rescipts (before all deddollers)	\$	260.40 100.47	_					
	oramary and necessary operating expenses	·\$	100.47	Сору					
	Net monthly income from a business, profession, or farm	\$	159.94	here ->	\$	159.94	\$	0.00	
6.	Net income from rental and other real property								
		4	Debtor 1						
	Gross receipts (before all deductions)	\$							
	Ordinary and necessary operating expenses	-\$ 5.		y here ->	\$	0.00	\$	0.00	
	Net monthly income from rental or other real proper	ty \$	COD_	y 11616 ->	» \$	0.00	\$ 	0.00	
1.	Interest, dividends, and royalties				Ψ	0.00		0.00	

Official Form 122A-1

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Debtor 1 Debtor 2	Herbert L. Schimkus Patricia A. Schimkus			Case numbe	er (if known)			
				Column A Debtor 1		Column B Debtor 2 o	or	
8. <b>U</b> ı	nemployment compensation			\$	41.17	\$	0.00	
	o not enter the amount if you contend that the amount	received was a bene	fit under					
	e Social Security Act. Instead, list it here:	0	00					
	For you \$ For your spouse \$		.00 .00					
	ension or retirement income. Do not include any am							
	enefit under the Social Security Act.	ount received that we	13 a	\$	0.00	\$	0.00	
Do re do	come from all other sources not listed above. Spe on the include any benefits received under the Social Sceived as a victim of a war crime, a crime against hun mestic terrorism. If necessary, list other sources on a real below.	ecurity Act or paymenanity, or international	nts I or					
	•			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	alculate your total current monthly income. Add lin ich column. Then add the total for Column A to the tot		\$	216.37	+	6,722.84	<b>=</b> \$	6,939.21
Part 2:	Determine Whether the Means Test Applies to	o You					Total o	current monthly
12. <b>C</b> a	alculate your current monthly income for the year.	Follow these steps:						
12	a. Copy your total current monthly income from line 1	1		Сор	y line 11	nere=>	\$	6,939.21
	Multiply by 12 (the number of months in a year)						_ x ^	
12	b. The result is your annual income for this part of the	form				12	b. \$	83,270.52
13. <b>C</b> a	alculate the median family income that applies to	ou. Follow these ste	ps:					
Fil	I in the state in which you live.	FL						
Fil	I in the number of people in your household.	2						
Fil	I in the median family income for your state and size of	of household.				13	.   \$	58,960.00
	of find a list of applicable median income amounts, good this form. This list may also be available at the banking		pecified i	n the separ	ate instruc	tions		
14. <b>H</b> d	ow do the lines compare?							
14	<ul> <li>Line 12b is less than or equal to line 13. Or Go to Part 3.</li> </ul>	n the top of page 1, cl	neck box	1, There is	no presun	nption of abu	se.	
14	b. Line 12b is more than line 13. On the top o Go to Part 3 and fill out Form 122A-2.	f page 1, check box 2	?, The pre	esumption o	f abuse is	determined l	by Form 12	22A-2.
Part 3:								
	By signing here, I declare under penalty of perjury	that the information of	n this sta	tement and	in any att	achments is	true and c	orrect.
	X /s/ Herbert L. Schimkus Herbert L. Schimkus			cia A. Schi A. Schimk				
	Signature of Debtor 1			of Debtor 2				
	Date January 30, 2019 MM / DD / YYYY		January MM / DD	30, 2019 / YYYY				
	If you checked line 14a, do NOT fill out or file Form	122A-2.						
	If you checked line 14b, fill out Form 122A-2 and fi	e it with this form.						

Fill in this information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Debtor 1 Herbert L. Schimkus	
Debtor 2 Patricia A. Schimkus	According to the calculations required by this Statement:
(Spouse, if filing)	There is no presumention of above
United States Bankruptcy Court for the: Middle District of Florida	■ 1. There is no presumption of abuse.
Case number(if known)	☐ 2. There is a presumption of abuse.
(in tallown)	☐ Check if this is an amended filing
Official Form 122A - 2	- Check if this is all affected himing
Chapter 7 Means Test Calculation	04/16
To fill out this form, you will need your completed copy of Chapter 7 Stateme	ent of Your Current Monthly Income (Official Form 122A-1).
Be as complete and accurate as possible. If two married people are filing tog space is needed, attach a separate sheet to this form, Include the line numbe additional pages, write your name and case number (if known).	, , , ,
Part 1: Determine Your Adjusted Income	
Copy your total current monthly income. Copy line 11 ft	rom Official Form 122A-1 here=> \$ 6,939.21
2. Did you fill out Column B in Part 1 of Form 122A-1?	
☐ No. Fill in \$0 for the total on line 3.	
■ Yes. Is your spouse Filing with you?	
☐ No. Go to line 3.	
■ Yes. Fill in \$0 for the total on line 3.	
Adjust your current monthly income by subtracting any part of your spendousehold expenses of you or your dependents. Follow these steps:	ouse's income not used to pay for the
On line 11, Column B of Form 122A–1, was any amount of the income you re expenses of you or your dependents?	eported for your spouse NOT regularly used for the household
■ No. Fill in 0 for the total on line 3.	
☐ Yes. Fill in the information below:	
State each purpose for which the income was used	Fill in the amount you
For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are subtracting from your spouse's income
	\$
	\$

4. Adjust your current monthly income. Subtract line 3 from line 1.

\$ 6,939.21

Copy total here=>... - \$ \_\_\_\_\_\_0.00

0.00

\_\_\_\_\_ \$\_\_\_\_

Total. \$ \_\_\_\_\_

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	Coloulate Vaux Dadustiana from Vaux Iraana		
2:	Calculate Your Deductions from Your Income		
an		Local Standards for certain expense amounts. Use these amounts andards, go online using the link specified in the separate available at the bankruptcy clerk's office.	
ır a	actual expenses if they are higher than the standards. D	s of your actual expense. In later parts of the form, you will use some of Do not deduct any amounts that you subtracted fro your spouse's that you subtracted from in income in lines 5 and 6 of form 122A-1.	
ou	r expenses differ from month to month, enter the average	ge expense.	
er	never this part of the from refers to you, it means both yo	ou and your spouse if Column B of Form 122A-1 is filled in.	
-	The number of people used in determining your ded	ductions from income	
F	Fill in the number of people who could be claimed as ex clus the number of any additional dependents whom you the number of people in your household.		
io	nal Standards You must use the IRS Nationa	al Standards to answer the questions in lines 6-7.	
	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and		202.0
t F	Standards, fill in the dollar amount for food, clothing, and  Out-of-pocket health care allowance: Using the numb the dollar amount for out-of-pocket health care. The nun	ber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and a higher IRS allowance for health care costs. If your actual expenses are	202.0
t I	Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the numb the dollar amount for out-of-pocket health care. The num beople who are 65 or olderbecause older people have	ber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and a higher IRS allowance for health care costs. If your actual expenses are	202.0
t t i	Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the numb the dollar amount for out-of-pocket health care. The num beople who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the addition	ber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and a higher IRS allowance for health care costs. If your actual expenses are	202.0
t I I	Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number open have nigher than this IRS amount, you may deduct the additional lies who are under 65 years of age	ber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and a higher IRS allowance for health care costs. If your actual expenses are onal amount on line 22.	02.0
op	Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the number dollar amount for out-of-pocket health care. The number ople who are 65 or older-because older people have nigher than this IRS amount, you may deduct the additional lewho are under 65 years of age  7a. Out-of-pocket health care allowance per person	ber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and a higher IRS allowance for health care costs. If your actual expenses are onal amount on line 22.  \$	202.0
op	Out-of-pocket health care allowance: Using the number of color of	ber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and a higher IRS allowance for health care costs. If your actual expenses are onal amount on line 22.  \$	202.0
op -	Out-of-pocket health care allowance: Using the number of dollar amount for out-of-pocket health care. The number of the out-of-pocket health care. The number of the out-of-pocket health care. The number of the out-of-pocket health care of the additional states of the out-of-pocket health care allowance per person out-of-pocket health care allowance per person out-of-pocket health care under 65.  Subtotal. Multiply line 7a by line 7b.	ber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and a higher IRS allowance for health care costs. If your actual expenses are onal amount on line 22.  \$	02.0
eop	Out-of-pocket health care allowance: Using the number dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care older people have nigher than this IRS amount, you may deduct the additional elements of the who are under 65 years of age  7a. Out-of-pocket health care allowance per person  7b. Number of people who are under 65  7c. Subtotal. Multiply line 7a by line 7b.	the other items.  \$\frac{1,2}{1,2}\$  The of people you entered in line 5 and the IRS National Standards, fill in mother of people is split into two categoriespeople who are under 65 and a higher IRS allowance for health care costs. If your actual expenses are onal amount on line 22.  \$\frac{52}{X} \frac{2}{2}\$  \$\frac{104.00}{Y}  \$\text{Copy here=>} \$\frac{104.00}{Y}	02.0
eop	Out-of-pocket health care allowance: Using the number defended by the dollar amount for out-of-pocket health care. The number defended by the dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care allowance per person.  The substitution of people who are under 65.	the other items.  \$	02.0

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Debtor 1 Patricia A. Schimkus Debtor 2 Case number (if known) **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 8. 541.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,040.00 listed for your county for mortgage or rent expenses..... 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Wells Fargo Home Mortgage 1,611.61 \$ Repeat this Copy amount on Total average monthly payment \$ 1,611.61 1,611.61 here=> line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 \$ or rent expense). If this amount is less than \$0, enter \$0. ..... here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 20.00 \$ affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: Home Owners Association 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 504.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

Herbert L. Schimkus

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or 1 H	Patricia A. Schimkus							
You	nicle ownership or lease ex u may not claim the expense re than two vehicles.							
Vehicle	Describe Vehicle 1:	2011 Chevrolet Colorac Value	do 80,000 m	iles NADA	Average	Trade		
3a. Own	nership or leasing costs using	g IRS Local Standard			\$	497.00		
	erage monthly payment for al not include costs for leased v	•	1.					
are o	calculate the average monthl contractually due to each se kruptcy. Then divide by 60.				at			
	Name of each creditor for	r Vehicle 1	Average n	nonthly				
	Suntrust Bk Tampa Bay	,	\$	65.56				
	Total A	Average Monthly Payment	\$	65.56	Copy here =>	-\$6	Repeat this amount on line 33b.	
3c. Net	Vehicle 1 ownership or leas	e expense			_		Copy net	
Subt	Vehicle 1 ownership or lease otract line 13b from line 13a.	if this amount is less than \$			\$	431.44	Copy net Vehicle 1 expense here => \$	431.4
Subt	otract line 13b from line 13a.	if this amount is less than \$ 2016 Chevrolet Trax 15	5,500 miles N		rage Trad		Vehicle 1 expense	431.4
Subfivehicle 3d. Own 3e. Aver	otract line 13b from line 13a.  Describe Vehicle 2:	if this amount is less than \$  2016 Chevrolet Trax 15  g IRS Local Standard	i,500 miles N		rage Trad	e Value	Vehicle 1 expense	431.4
Subfivehicle 3d. Own 3e. Aver	Describe Vehicle 2: nership or leasing costs using grage monthly payment for al	if this amount is less than \$  2016 Chevrolet Trax 15  g IRS Local Standard	i,500 miles N	ude costs fo	rage Trad	e Value	Vehicle 1 expense	431.4
Subfivehicle 3d. Own 3e. Aver	Describe Vehicle 2: nership or leasing costs using a grage monthly payment for all sed vehicles.	if this amount is less than \$  2016 Chevrolet Trax 15  g IRS Local Standard	5,500 miles N  2. Do not inclu  Average n	ude costs fo	rage Trad	e Value	Vehicle 1 expense	431.4
Subfidence State Own Be. Aver	Describe Vehicle 2: nership or leasing costs using the search creditor for leach creditor for Achieva CU	if this amount is less than \$  2016 Chevrolet Trax 15  g IRS Local Standard	5,500 miles N  2. Do not inclu  Average n payment	ude costs fo	rage Trad	e Value	Vehicle 1 expense here => \$  Repeat this amount on	431.4
Subfivehicle  3d. Own  3e. Averence lease	Describe Vehicle 2: nership or leasing costs using the search creditor for leach creditor for Achieva CU	2016 Chevrolet Trax 15 g IRS Local Standard I debts secured by Vehicle 2  Average Monthly Payment e expense	2. Do not incluse Average in payment \$\$	nonthly 201.96	rage Trad  S Copy here -> -\$	e Value 497.00	Vehicle 1 expense here => \$  Repeat this amount on	431.4 295.0
Subtine Subtine Subtine St. Net Subtine Subtin Subtine Subtine Subtine Subtine Subtine Subtine Subtine Subtine	Describe Vehicle 2: nership or leasing costs using the sed vehicles.  Name of each creditor for Achieva CU  Total Achieva CU	2016 Chevrolet Trax 15 g IRS Local Standard I debts secured by Vehicle 2  Average Monthly Payment e expense if this amount is less than \$  E: If you claimed 0 vehicles	5,500 miles N  2. Do not inclu  Average right payment  \$  \$  0, enter \$0	nonthly 201.96 201.96	rage Trad  \$ r  Copy here => -\$	e Value 497.00 201.	Vehicle 1 expense here => \$  Repeat this amount on line 33c.  Copy net Vehicle 2 expense here => \$	

Herbert L. Schimkus

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Debtor 1
Debtor 2
Patricia A. Schimkus
Case number (if known)

Oth		addition to the expense deductions listed above, you are allowed your monthly expenses following IRS categories.	for	
16.	self-employment taxes, social s your pay for these taxes. Howe	unt that you will actually owe for federal, state and local taxes, such as income taxes, security taxes, and Medicare taxes. You may include the monthly amount withheld from ever, if you expect to receive a tax refund, you must divide the expected refund by 12 the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sale	es, or use taxes.	\$	1,342.19
17.	<b>Involuntary deductions:</b> The contributions, union dues, and	total monthly payroll deductions that your job requires, such as retirement uniform costs.		
	Do not include amounts that ar	re not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payment	thly premiums that you pay for your own term life insurance. If two married people are ts that you make for your spouse's term life insurance. Do not include premiums for life , for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	0.00
19.		e total monthly amount that you pay as required by the order of a court or spousal or child support payments.		
	Do not include payments on pa	ast due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly a  as a condition for your job, or	amount that you pay for education that is either required: or		
	for your physically or menta	lly challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly a	mount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for an	ny elementary or secondary school education.	\$	0.00
22.	that is required for the health a	ses, excluding insurance costs: The monthly amount that you pay for health care nd welfare of you or your dependents and that is not reimbursed by insurance or paid aclude only the amount that is more than the total entered in line 7.		
	Payments for health insurance	or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependents, s	whone services: The total monthly amount that you pay for telecommunication services such as pagers, call waiting, caller identification, special long distance, or business cell accessary for your health and welfare or that of your dependents or for the production of by your employer.		
	, ,	asic home telephone, internet and cell phone service. Do not include self-employment ted on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	50.00
24.	Add all of the expenses allow Add lines 6 through 23.	ved under the IRS expense allowances.	\$	4,489.67

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Debtor 1 Debtor 2 Patricia A. Schimkus

Case number (if known)

Add	itional Expense Deductions These are additional of	deduction	s allowed by the	e Means Test.		
	Note: Do not include a	any exper	nse allowances	listed in lines 6-24.		
25.	Health insurance, disability insurance, and health sinsurance, disability insurance, and health savings acc your dependents.				r	
	Health insurance	\$	180.00			
	Disability insurance	\$	344.22			
	Health savings account	+ \$	250.00			
	Total	\$	774.22	Copy total here=>	\$	774.22
	Do you actually spend this total amount?			,		
	<ul><li>No. How much do you actually spend?</li><li>Yes</li></ul>	\$				
26.	Continued contributions to the care of household continue to pay for the reasonable and necessary care your household or member of your immediate family winclude contributions to an account of a qualified ABLE	or family in and supper the is unab	ort of an elderly ble to pay for su	y, chronically ill, or disabled member of ich expenses. These expenses may	\$	0.00
27.	<b>Protection against family violence.</b> The reasonably resafety of you and your family under the Family Violence					
	By law, the court must keep the nature of these expens	ses confid	ential.		\$	0.00
28.	<b>Additional home energy costs.</b> Your home energy coline 8.	osts are in	cluded in your i	insurance and operating expenses on		
	If you believe that you have home energy costs that are 8, then fill in the excess amount of home energy costs.		an the home en	ergy costs included in expenses on line		
	You must give your case trustee documentation of you amount claimed is reasonable and necessary.	r actual e	xpenses, and y	ou must show that the additional	\$	0.00
29.	Education expenses for dependent children who at \$160.42* per child) that you pay for your dependent chipublic elementary or secondary school.					
	You must give your case trustee documentation of you claimed is reasonable and necessary and not already a					
	* Subject to adjustment on 4/01/19, and every 3 years	after that	for cases begur	n on or after the date of adjustment.	\$	0.00
30.	<b>Additional food and clothing expense.</b> The monthly higher than the combined food and clothing allowances than 5% of the food and clothing allowances in the IRS	s in the IR	S National Star			
	To find a chart showing the maximum additional allowal instructions for this form. This chart may also be availa					
	You must show that the additional amount claimed is re	easonable	and necessary	/.	\$	0.00
31.	<b>Continuing charitable contributions.</b> The amount the instruments to a religious or charitable organization. 26			ntribute in the form of cash or financial	+\$	225.00
32.	Add all of the additional expense deductions. Add lines 25 through 31.				\$	999.22

otor 1 otor 2	Herbert L. Schimkus Patricia A. Schimkus		Case nur	mber ( <i>if known</i> )			
edu	ctions for Debt Payment						
3. Fo	or debts that are secured by an intere ans, and other secured debt, fill in lin	st in property that you own, including hom	e mor	tgages, vehicle			
To		ment, add all amounts that are contractually	due to	each secured			
0.	Mortgages on your home:	oannapas, mon amas s, so.				verage month	ıly
3a.	Copy line 9b here			=	:> \$	1,61	1.61
	Loans on your first two vehicles:						
3b.	Copy line 13b here			=	<b>:&gt;</b> \$	6	5.56
3c.					<b>:&gt;</b> \$	20	1.96
3d.	List other secured debts:						
ame	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes insurance?			
				□ No			
	-NONE-			☐ Yes	\$		
-					Ψ		
				□ No			
_		_			\$		
				□ No			
				☐ Yes	+\$		
-		_			7		
					Copy		
3e.	Total average monthly payment. Add lin	nes 33a through 33d	\$_	1,879.13	here=>	\$ 1,87	79.13
or	No. Go to line 35. Yes. State any amount that you must	secured by your primary residence, a vehicle propert or the support of your dependents?  It pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i> ) information below.	ŕ				
Name	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cu amount	re
NO	NE-			\$	-60 = \$		
					]_		
		Tota	al \$_	0.00	Copy total here=>	\$	0.
	o you owe any priority claims such as e past due as of the filing date of you	a priority tax, child support, or alimony - t	hat				
_	No. Go to line 36.						
		nese priority claims. Do not include current or					

ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims

\$ <u>1.00</u> ÷ 60 = \$ <u>0.02</u>

Debtor 1 Debtor 2		ert L. Schimkus cia A. Schimkus		Cas	se nı	umber (if known)			
Fo	or more	eligible to file a case under Chapter 13? 11 U.S.C. § 10 information, go online using the link for <i>Bankruptcy Basic</i> ns for this form. <i>Bankruptcy Basics</i> may also be available	s specifie	d in the sepa nkruptcy clerk	rate k's (	e office.			
	No.	Go to line 37.							
	☐ Yes. Fill in the following information.								
		Projected monthly plan payment if you were filing under	Chapter 1	3	\$				
		Current multiplier for your district as stated on the list iss Administrative Office of the United States Courts (for dis and North Carolina) or by the Executive Office for United (for all other districts).	tricts in Ala	abama	X				
		To find a list of district multipliers that includes your districted link specified in the separate instructions for this form be available at the bankruptcy clerk's office.					Copy to	tal	
		Average monthly administrative expense if you were filing	g under C	hapter 13		\$	here=>		
		of the deductions for debt payment. es 33e through 36.						\$1,879	9.15
Total	Deduc	tions from Income							
38. <b>A</b> c	dd all o	of the allowed deductions.							
		ne 24, All of the expenses allowed under IRS e allowances	\$	4,489.67	7_				
(	Copy lin	ne 32, All of the additional expense deductions	\$	999.22	2				
(	Copy lin	ne 37, All of the deductions for debt payment	+\$	1,879.15	5	٦			
		Total deductions	\$	7,368.04	4	Copy total here	=>	\$ 7,3	868.04
Part 3:	Det	ermine Whether There is a Presumption of Abuse							
39. <b>C</b> a	alculate	e monthly disposable income for 60 months							
3	39a. Co	py line 4, adjusted current monthly income	\$	6,939.2	1_				
3	39b. Co	py line 38, Total deductions	- \$	7,368.04	4				
3		onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	-428.83	3	Copy here=>\$	-4:	28.83	
F	or the i	next 60 months (5 years)				x 60	)		
		· · · · · · · · · · · · · · · · · · ·					Г		
3	39d. <b>To</b>	tal. Multiply line 39c by 60	39d.	\$	-25	5,729.80 Copy here=	> \$	-25,729	9.80
40. <b>Fi</b>	nd out	whether there is a presumption of abuse. Check the b	ox that ap	plies:					
	I The li	ine 39d is less than \$7,700*. On the top of page 1 of this	form, che	eck box 1, Th	ere	is no presumption	of abuse	e. Go to Part 5.	
		ine 39d is more than \$12,850*. On the top of page 1 of t 4 if you claim special circumstances. Go to Part 5.	his form, c	check box 2,	The	ere is a presumption	of abus	se. You may fill o	out
	] The li	ine 39d is at least \$7,700*, but not more than \$12,850*	. Go to line	e 41.					
*S	*Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.								

Herbert L. Schimkus

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Debtor 1 Debtor 2		ert L. Schimkus cia A. Schimkus	Case	e number ( <i>if</i>	known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If y A Summary of Your Assets and Liabilities and Certain Statistical In Schedules (Official Form 106Sum), you may refer to line 3b on that	nformation	\$x	.25	7	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(I	,,,,,,,,,,	\$		Copy here=>	\$
25	% of y	Multiply line 41a by 0.25  ne whether the income you have left over after subtracting all all our unsecured, nonpriority debt. e box that applies:		ctions is	enough to pa	ay	
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check l Part 5.	box 1, <i>There i</i>	is no pres	sumption of al	buse.	
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this <i>umption of abuse.</i> You may fill out Part 4 if you claim special circums					
Part 4:	Giv	e Details About Special Circumstances					
		re any special circumstances that justify additional expenses of alternative? 11 U.S.C. § 707(b)(2)(B).	r adjustment	s of curr	ent monthly	income fo	or which there is no
■ N	o. Go	to Part 5.					
□ Y		in the following information. All figures should reflect your average in. You may include expenses you listed in line 25.	monthly expe	nse or inc	come adjustm	ent for ea	ach
	ne	u must give a detailed explanation of the special circumstances that cessary and reasonable. You must also give your case trustee docu ustments.					
	G	ive a detailed explanation of the special circumstances			onthly expens djustment	se	
			\$				
			\$				
	_		\$				
			\$				
Part 5:	_	n Below					
		gning here, I declare under penalty of perjury that the information on				nts is true	and correct.
	Не	erbert L. Schimkus P	s/ Patricia A. Patricia A. Sc	himkus	us		
Do	•		ignature of De anuary 30, 2				
Da	MN	M/DD / YYYY M	anuary 30, 2 IM / DD / YY	YY			

Debtor 1 Debtor 2 Patricia A. Schimkus

Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 07/01/2018 to 12/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Transworld Quality Engineering

Income by Month:

6 Months Ago:	07/2018	\$0.00
5 Months Ago:	08/2018	\$91.57
4 Months Ago:	09/2018	\$0.00
3 Months Ago:	10/2018	\$0.00
2 Months Ago:	11/2018	\$0.00
Last Month:	12/2018	\$0.00
	Average per month:	\$15.26

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Uber while waiting for SSI

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	07/2018	\$995.50	\$395.34	\$600.16
5 Months Ago:	08/2018	\$566.91	\$207.46	\$359.45
4 Months Ago:	09/2018	\$0.00	\$0.00	\$0.00
3 Months Ago:	10/2018	\$0.00	\$0.00	\$0.00
2 Months Ago:	11/2018	\$0.00	\$0.00	\$0.00
Last Month:	12/2018	\$0.00	\$0.00	\$0.00
	Average per month:	\$260.40	\$100.47	
	_		Average Monthly NET Income:	\$159.94

Line 8 - Unemployment compensation (included in CMI)

Source of Income: Unemployment -husband

Income by Month:

6 Months Ago:	07/2018	\$247.00
5 Months Ago:	08/2018	\$0.00
4 Months Ago:	09/2018	\$0.00
3 Months Ago:	10/2018	\$0.00
2 Months Ago:	11/2018	\$0.00
Last Month:	12/2018	\$0.00
	Average per month:	\$41.17

Non-CMI - Social Security Act Income Source of Income: Social Security Constant income of \$2,247.00 per month.

Debtor 1	Herbert L. Schimkus	
	Patricia A. Schimkus	Case number (if known)

### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 07/01/2018 to 12/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: AT&T

Income by Month:

6 Months Ago:	07/2018	\$6,722.84
5 Months Ago:	08/2018	\$6,722.84
4 Months Ago:	09/2018	\$6,722.84
3 Months Ago:	10/2018	\$6,722.84
2 Months Ago:	11/2018	\$6,722.84
Last Month:	12/2018	\$6,722.84
	Average per month:	\$6,722.84

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# United States Bankruptcy Court Middle District of Florida

In re	Herbert L. Schimkus Patricia A. Schimkus		Case No.	
		Debtor(s)	Chapter	7
The ab		IFICATION OF CREDITOR N		of their knowledge.
Date:	January 30, 2019	/s/ Herbert L. Schimkus Herbert L. Schimkus Signature of Debtor		
Date:	January 30, 2019	/s/ Patricia A. Schimkus Patricia A. Schimkus		

Signature of Debtor

Herbert L. Schimkus 4049 Headsail Dr New Port Richey FL 34652 BayCare Health System 2985 Drew Street Clearwater FL 33759 Freedom Plus 1875 S Grant St Ste 400 San Mateo CA 94402

Patricia A. Schimkus 4049 Headsail Dr New Port Richey FL 34652 Citibank/The Home Depot Attn: Recover Po Box 790034 St Louis MO 63179 Internal Revenue Service PO Box 21126 Philadelphia PA 19114-0326

Sandra H. Day The Day Law Office PO Box 5535 Spring Hill, FL 34611-5535 Citibank/The Home Depot Po Box 6497 Sioux Falls SD 57117 MB Financial Bank Attn: Bankruptcy Dept. 800 West Madison Street Chicago IL 60607

Achieva CU Attn: Bankruptcy Po Box 1500 Dunedin FL 34697 Citicards Cbna Citi Bank Po Box 6077 Sioux Falls SD 57117 MB Financial Bank 6111 N River Rd Rosemont IL 60018

Achieva CU 10125 Ulmerton Rd Largo FL 34649

Citicards Cbna Po Box 6217 Sioux Falls SD 57117 Mr. Cooper Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell TX 75019

Amex Correspondence/Bankruptcy Po Box 981540

El Paso TX 79998

Comenitycb/dtlfirstfin Attn: Bankruptcy Dept Po Box 182125 Columbus OH 43218 Mr. Cooper 350 Highland Houston TX 77067

Amex Po Box 297871 Fort Lauderdale FL 33329 Comenitycb/dtlfirstfin Po Box 182120 Columbus OH 43218 Navient Attn: Bankruptcy Po Box 9000 Wiles-Barr PA 18773

Bank Of America 4909 Savarese Circle FI1-908-01-50 Tampa FL 33634 Dental First Financing PO Box 659622 San Antonio TX 78265-9622 Navient 123 S Justison St Wilmington DE 19801

Bank Of America Po Box 982238 El Paso TX 79998 Freedom Plus Attn: Bankruptcy 1875 S Grant St, Ste 450 San Mateo CA 94402 Pnc Mortgage Attn: Bankruptcy 3232 Newmark Drive Miamisburg OH 45342 Pnc Mortgage Po Box 8703 Dayton OH 45401

Suntrust Bk Tampa Bay Attn: Bankruptcy Mail Code VA-RVW-6290 PO Box 85092 Richmond VA 23286

Suntrust Bk Tampa Bay Po Box 3303 Tampa FL 33601

Synchrony Bank/Amazon Attn: Bankruptcy Dept Po Box 965060 Orlando FL 32896

Synchrony Bank/Amazon Po Box 965015 Orlando FL 32896

Wells Fargo Home Mortgage Attn: Bankruptcy Po Box 10335 Des Moines IA 50306

Wells Fargo Home Mortgage 8480 Stagecoach Cir Frederick MD 21701 B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Middle District of Florida

In	re	Herbert L. Schimkus Patricia A. Schimkus		Case No.			
	•		Debtor(s)	Chapter	7		
		DISCLOSURE OF COMPENSATI			, ,		
1.	cor	cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
		For legal services, I have agreed to accept		S	1,680.00		
		Prior to the filing of this statement I have received	9	S	1,680.00		
		Balance Due	9	S	0.00		
2.	\$_	335.00 of the filing fee has been paid.					
3.	The	e source of the compensation paid to me was:					
		■ Debtor □ Other (specify):					
4.	The	e source of compensation to be paid to me is:					
		■ Debtor □ Other (specify):					
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
6.	In	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	<ul><li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li><li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li><li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li><li>d. [Other provisions as needed]</li></ul>						
7.	Ву	agreement with the debtor(s), the above-disclosed fee does not Negotiations with secured creditors to reduce to ma representation of the debtors in any dischargeability	rket value; preparation and	filing of rea		eding.	
			IFICATION				
thi		ertify that the foregoing is a complete statement of any agreeme kruptcy proceeding.	ent or arrangement for paymen	nt to me for re	epresentation of the debtor	r(s) in	
	Jani	uary 30, 2019	/s/ Sandra H. Day				
	Date	,	Sandra H. Day Signature of Attorney				
			The Day Law Office				
			PO Box 5535 Spring Hill, FL 34611-553	5			
			352-684-6545 Fax: 352-				
			daylawofficebk@tampaba	y.rr.com			